

State: Pennsylvania **Filing Company:** Continental General Insurance Company
TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified
Product Name: Long Term Care
Project Name/Number: GALIC Forms Rate Increase Filing for 2017/

Filing at a Glance

Company: Continental General Insurance Company
Product Name: Long Term Care
State: Pennsylvania
TOI: LTC03G Group Long Term Care
Sub-TOI: LTC03G.001 Qualified
Filing Type: Rate - Other (Not M.U. or G.I. Product)
Date Submitted: 11/27/2017
SERFF Tr Num: GLTC-131249558
SERFF Status: Assigned
State Tr Num: GLTC-131249558
State Status: Received Review in Progress
Co Tr Num: GALIC FORMS RATE INCREASE FILING FOR 2017 (GROUP)

Implementation: On Approval
Date Requested:
Author(s): Deborah Keeler, Stephanie Entzminger, Beth Lovaas, Jane Cundiff, Matthew Pasyk, Cameron Zima, Eric Coldewey
Reviewer(s): Jim Laverty (primary)
Disposition Date:
Disposition Status:
Implementation Date:

State Filing Description:

Proposed aggregate 210.8% increase on 4 PA policyholders of Continental General's individual LTC forms: 1LTCGP0001-PA and 1LTCGP0008-PA.

State: Pennsylvania **Filing Company:** Continental General Insurance Company
TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified
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General Information

Project Name: GALIC Forms Rate Increase Filing for 2017
Project Number:
Requested Filing Mode: Review & Approval
Explanation for Combination/Other:
Submission Type: New Submission
Filing Status Changed: 11/28/2017
State Status Changed: 11/28/2017
Created By: Matthew Pasyk
Corresponding Filing Tracking Number:
State TOI: LTC03G Group Long Term Care

Status of Filing in Domicile:
Date Approved in Domicile:
Domicile Status Comments:
Market Type:
Overall Rate Impact: 210.8%

Deemer Date:
Submitted By: Matthew Pasyk

State Sub-TOI: LTC03G.001 Qualified

Filing Description:

Enclosed for your review, please find copies of an Actuarial Memorandum and rate sheets in support of the current proposed increase on the above-referenced Long-Term Care Insurance products.

The base rate increase applies to the base policy and all applicable benefit riders for which a premium is paid. The rate increase will be effective on the first premium due date subsequent to state insurance department approval and in accordance with state policyholder notification requirements, with the additional condition that no policyholder will receive a rate increase sooner than one year after receiving a prior rate increase, if applicable.

This filing applies to inforce policies issued in this state. The above referenced policy forms are Group Long Term Care insurance products, which are no longer being sold.

Enclosed are any necessary certifications, transmittals, and/or filing fees as may be required by your state. I hope that with this information your approval of this filing will be forthcoming. If you have any questions or need additional information, please feel free to contact me.

Company and Contact

Filing Contact Information

Matthew Pasyk, matthew.pasyk@continental-ins.com
11001 Lakeline Blvd 512-410-0818 [Phone]
Ste 120
Texas
Austin, TX 78717

Filing Company Information

Continental General Insurance Company	CoCode: 71404	State of Domicile: Texas
11001 Lakeline Blvd	Group Code: 84	Company Type: Life & Health
Suite 120	Group Name:	State ID Number:
Austin, TX 78717	FEIN Number: 47-0463747	
(866) 830-0607 ext. [Phone]		

State: Pennsylvania **Filing Company:** Continental General Insurance Company
TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified
Product Name: Long Term Care
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Filing Fees

Fee Required? Yes
Fee Amount: \$100.00
Retaliatory? Yes
Fee Explanation: CGI's state of domicile is Texas. Texas's fee for rate increase filing is \$100.
Per Company: Yes

Company	Amount	Date Processed	Transaction #
Continental General Insurance Company	\$100.00	11/27/2017	131891825

SERFF Tracking #:	GLTC-131249558	State Tracking #:	GLTC-131249558	Company Tracking #:	GALIC FORMS RATE INCREASE FILING FOR 201...
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State:	Pennsylvania	Filing Company:	Continental General Insurance Company
TOI/Sub-TOI:	LTC03G Group Long Term Care/LTC03G.001 Qualified		
Product Name:	Long Term Care		
Project Name/Number:	GALIC Forms Rate Increase Filing for 2017/		

Rate Information

Rate data applies to filing.

Filing Method:	SERFF
Rate Change Type:	Increase
Overall Percentage of Last Rate Revision:	20.000%
Effective Date of Last Rate Revision:	06/20/2016
Filing Method of Last Filing:	SERFF
SERFF Tracking Number of Last Filing:	

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Continental General Insurance Company	210.800%	210.800%	\$16,138	4	\$7,657	210.800%	210.800%

SERFF Tracking #:	GLTC-131249558	State Tracking #:	GLTC-131249558	Company Tracking #:	GALIC FORMS RATE INCREASE FILING FOR 201...
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State:	Pennsylvania	Filing Company:	Continental General Insurance Company
TOI/Sub-TOI:	LTC03G Group Long Term Care/LTC03G.001 Qualified		
Product Name:	Long Term Care		
Project Name/Number:	GALIC Forms Rate Increase Filing for 2017/		

Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		PA - GALIC 1LTCTG Rate Sheets	1LTCTGP0001-PA, 1LTCTGP0008-PA	Revised	Previous State Filing Number: GLTC-130340311 Percent Rate Change Request: 210.8	PA - GALIC 1LTCTG Rate Sheets.pdf,

Current Rates

Continental General Insurance Company
Long Term Care Form 1LTCGP0001
Base Premiums for: \$10/Day NH, HHC Daily Max = 100% of NH
0-Day Elimination Period
Single Insured Annual Premiums *

Issue Age	Benefit Period							
	<u>2-Year</u>	<u>3-Year</u>	<u>4-Year</u>	<u>5-Year</u>	<u>6-Year</u>	<u>8-Year</u>	<u>Lifetime</u>	
<38	27	32	35	37	40	45	50	* Joint applicants receive 15% discount.
38	29	33	36	39	43	48	53	
39	30	35	39	40	45	50	56	
40	32	36	40	43	48	53	59	Modal Factors Monthly: 0.09 Quarterly: 0.2625 Semiannual: 0.525
41	33	39	42	45	49	55	62	
42	35	40	45	48	52	58	65	
43	36	42	48	50	55	62	69	
44	39	45	50	53	59	66	75	
45	40	48	53	56	62	69	79	
46	43	50	56	59	66	73	84	
47	45	53	59	63	69	78	88	
48	46	55	60	65	72	79	91	
49	48	56	62	66	73	82	94	
50	49	58	63	69	76	85	96	
51	50	59	66	71	78	88	99	
52	50	60	68	73	81	91	102	
53	53	65	72	78	85	95	108	
54	56	68	76	82	91	101	114	
55	59	72	79	86	95	105	120	
56	62	75	84	89	99	111	125	
57	65	79	88	94	104	117	131	
58	72	86	96	104	115	128	144	
59	79	95	107	114	127	141	158	
60	86	104	115	124	137	153	171	
61	92	112	125	134	148	166	186	
62	99	120	134	144	160	177	199	
63	109	131	147	157	173	193	216	
64	118	143	158	170	187	209	232	
65	127	153	170	183	202	225	249	
66	137	164	183	196	216	239	265	
67	145	176	194	209	229	255	282	
68	163	196	219	233	258	285	315	
69	180	217	242	259	285	317	350	
70	197	239	266	285	314	348	383	
71	215	259	289	310	341	379	416	
72	233	281	314	336	370	410	451	
73	275	333	372	397	436	484	531	
74	317	383	428	458	504	559	611	
75	359	435	485	520	572	632	691	
76	402	487	543	580	638	707	772	
77	444	537	600	642	706	780	851	
78	492	598	667	713	783	867	945	
79	540	657	734	785	863	955	1,037	
80	589	716	801	855	942	1,041	1,129	
81	638	776	867	927	1,020	1,128	1,221	
82	687	835	935	998	1,099	1,214	1,315	
83	739	900	1,005	1,073	1,181	1,305	1,410	
84	792	963	1,076	1,148	1,263	1,395	1,506	
85	845	1,027	1,146	1,223	1,345	1,486	1,603	
86	897	1,092	1,217	1,297	1,428	1,577	1,699	
87	950	1,155	1,287	1,372	1,511	1,668	1,796	
88	991	1,201	1,336	1,424	1,567	1,729	1,860	
89	1,032	1,247	1,385	1,475	1,621	1,793	1,925	
90	1,073	1,293	1,434	1,525	1,678	1,855	1,990	
91	1,113	1,339	1,482	1,575	1,734	1,917	2,055	
92	1,155	1,385	1,531	1,626	1,790	1,979	2,120	
93	1,179	1,413	1,560	1,656	1,823	2,017	2,160	
94	1,204	1,440	1,588	1,685	1,855	2,055	2,199	
95	1,230	1,467	1,616	1,715	1,888	2,092	2,239	
96	1,254	1,493	1,644	1,745	1,921	2,131	2,280	
97+	1,279	1,521	1,673	1,774	1,954	2,169	2,318	

Current Rates

Continental General Insurance Company

Long Term Care Form 1LTCGP0001

Base Premiums for: \$50,000 Pool of Money, HHC Daily Max = 100% of NH

0-Day Elimination Period

Single Insured Annual Premiums *

Issue	-----	Daily Max	-----	
<u>Age</u>	<u>\$75/Day</u>	<u>\$100/Day</u>	<u>\$125/Day</u>	
<38	230	243	253	* Joint applicants receive 15% discount.
38	239	255	266	
39	249	265	278	
40	259	276	289	
41	268	287	301	
42	278	298	312	Modal Factors
43	292	314	330	Monthly: 0.09
44	307	331	348	Quarterly: 0.2625
45	321	347	366	Semiannual: 0.525
46	337	364	383	
47	351	380	402	
48	359	390	412	
49	367	400	423	
50	376	410	433	
51	384	419	445	
52	392	429	455	
53	413	452	481	
54	433	477	505	
55	455	500	531	
56	475	523	556	
57	497	547	582	
58	544	602	641	
59	593	657	700	
60	642	711	759	
61	690	768	818	
62	739	822	877	
63	811	901	960	
64	883	981	1,044	
65	955	1,060	1,128	
66	1,028	1,139	1,211	
67	1,100	1,218	1,295	
68	1,225	1,359	1,444	
69	1,351	1,500	1,596	
70	1,476	1,642	1,745	
71	1,601	1,783	1,896	
72	1,727	1,924	2,046	
73	2,040	2,269	2,413	
74	2,353	2,616	2,779	
75	2,667	2,962	3,145	
76	2,979	3,309	3,511	
77	3,293	3,655	3,878	
78	3,646	4,046	4,291	
79	4,000	4,438	4,706	
80	4,353	4,830	5,121	
81	4,707	5,221	5,535	
82	5,060	5,613	5,949	
83	5,443	6,041	6,405	
84	5,825	6,468	6,862	
85	6,208	6,898	7,318	
86	6,589	7,325	7,775	
87	6,972	7,754	8,231	
88	7,273	8,103	8,607	
89	7,576	8,451	8,983	
90	7,877	8,800	9,359	
91	8,178	9,148	9,734	
92	8,480	9,497	10,110	
93	8,667	9,723	10,356	
94	8,855	9,949	10,601	
95	9,042	10,176	10,846	
96	9,229	10,403	11,092	
97+	9,418	10,629	11,337	

Current Rates

Continental General Insurance Company
Long Term Care Form 1LTCGP0001
Base Premiums for: \$75,000 Pool of Money,HHC Daily Max = 100% of NH
0-Day Elimination Period
Single Insured Annual Premiums *

Issue Age	----- Daily Max -----						
	<u>\$75/Day</u>	<u>\$100/Day</u>	<u>\$125/Day</u>	<u>\$150/Day</u>	<u>\$175/Day</u>	<u>\$200/Day</u>	
<38	259	278	292	302	314	323	* Joint applicants receive 15% discount.
38	271	292	307	318	331	341	
39	282	305	323	334	348	359	
40	294	320	337	348	364	376	
41	307	333	353	364	382	393	
42	318	347	367	380	399	410	Modal Factors Monthly: 0.09 Quarterly: 0.2625 Semiannual: 0.525
43	337	367	390	405	423	438	
44	354	389	412	429	449	464	
45	373	409	435	452	475	491	
46	390	431	458	477	501	517	
47	409	451	481	501	526	544	
48	420	464	495	517	543	562	
49	431	478	510	531	560	580	
50	442	491	524	547	577	598	
51	452	504	540	563	595	616	
52	464	517	554	579	612	634	
53	490	547	586	612	648	671	
54	514	576	618	647	683	708	
55	540	605	649	680	719	746	
56	566	635	681	713	755	782	
57	590	664	713	746	791	819	
58	651	733	788	825	874	907	
59	710	802	863	904	959	995	
60	770	871	937	984	1,044	1,083	
61	831	939	1,012	1,063	1,129	1,171	
62	890	1,008	1,087	1,140	1,212	1,260	
63	975	1,103	1,188	1,246	1,323	1,372	
64	1,058	1,197	1,289	1,349	1,433	1,486	
65	1,143	1,292	1,390	1,454	1,544	1,600	
66	1,228	1,385	1,489	1,558	1,653	1,714	
67	1,312	1,479	1,590	1,662	1,764	1,827	
68	1,466	1,656	1,780	1,860	1,976	2,048	
69	1,620	1,832	1,970	2,059	2,187	2,267	
70	1,774	2,007	2,160	2,256	2,399	2,487	
71	1,928	2,183	2,350	2,455	2,611	2,706	
72	2,082	2,359	2,539	2,654	2,822	2,926	
73	2,462	2,788	2,998	3,128	3,326	3,446	
74	2,843	3,216	3,457	3,603	3,830	3,966	
75	3,223	3,645	3,917	4,077	4,333	4,486	
76	3,603	4,072	4,376	4,552	4,837	5,005	
77	3,982	4,501	4,836	5,026	5,341	5,525	
78	4,418	4,994	5,364	5,568	5,918	6,123	
79	4,853	5,486	5,894	6,111	6,497	6,719	
80	5,288	5,979	6,422	6,654	7,075	7,317	
81	5,724	6,471	6,952	7,197	7,654	7,913	
82	6,159	6,964	7,481	7,740	8,231	8,509	
83	6,624	7,501	8,065	8,340	8,873	9,176	
84	7,089	8,037	8,649	8,941	9,516	9,842	
85	7,554	8,572	9,233	9,540	10,158	10,509	
86	8,019	9,109	9,818	10,140	10,800	11,174	
87	8,484	9,645	10,401	10,741	11,442	11,841	
88	8,829	10,057	10,862	11,225	11,965	12,388	
89	9,171	10,469	11,323	11,709	12,488	12,934	
90	9,516	10,881	11,784	12,194	13,009	13,481	
91	9,858	11,292	12,244	12,678	13,532	14,027	
92	10,202	11,704	12,705	13,163	14,054	14,574	
93	10,408	11,956	12,993	13,474	14,391	14,930	
94	10,613	12,210	13,281	13,787	14,728	15,286	
95	10,819	12,462	13,568	14,098	15,067	15,643	
96	11,025	12,715	13,856	14,410	15,404	15,998	
97+	11,229	12,967	14,142	14,721	15,742	16,354	

Current Rates

Continental General Insurance Company Long Term Care Form 1LTCGP0001 Base Premiums for: \$100,000 Pool of Money, HHC Daily Max = 100% of NH 0-Day Elimination Period Single Insured Annual Premiums *

Issue Age	----- Daily Max -----						
	<u>\$75/Day</u>	<u>\$100/Day</u>	<u>\$125/Day</u>	<u>\$150/Day</u>	<u>\$175/Day</u>	<u>\$200/Day</u>	
<38	281	305	327	341	354	369	* Joint applicants receive 15% discount.
38	294	321	344	360	374	390	
39	308	337	361	379	395	412	
40	321	353	380	399	415	433	Modal Factors Monthly: 0.09 Quarterly: 0.2625 Semiannual: 0.525
41	336	369	397	418	435	455	
42	348	384	415	436	455	477	
43	370	409	442	465	487	510	
44	390	433	469	494	517	543	
45	410	456	495	524	547	575	
46	432	481	523	553	579	608	
47	452	505	550	582	609	641	
48	465	521	567	602	631	664	
49	478	537	586	621	651	687	
50	491	553	605	641	672	708	
51	504	567	622	661	694	732	
52	516	583	641	681	716	755	
53	544	618	678	721	757	801	
54	573	651	716	762	801	847	
55	602	684	753	802	844	893	
56	631	717	791	842	886	937	
57	660	752	828	883	929	984	
58	727	831	917	978	1,030	1,093	
59	795	910	1,007	1,073	1,132	1,201	
60	863	989	1,096	1,169	1,233	1,309	
61	930	1,068	1,185	1,264	1,333	1,418	
62	998	1,148	1,274	1,361	1,436	1,526	
63	1,090	1,253	1,390	1,483	1,564	1,663	
64	1,184	1,358	1,506	1,606	1,692	1,800	
65	1,276	1,464	1,621	1,728	1,820	1,937	
66	1,369	1,570	1,738	1,850	1,950	2,074	
67	1,462	1,675	1,853	1,973	2,078	2,210	
68	1,636	1,876	2,079	2,213	2,333	2,483	
69	1,810	2,078	2,304	2,454	2,586	2,755	
70	1,983	2,280	2,530	2,694	2,841	3,027	
71	2,157	2,481	2,756	2,935	3,095	3,299	
72	2,330	2,683	2,981	3,175	3,349	3,571	
73	2,758	3,172	3,522	3,751	3,953	4,213	
74	3,184	3,662	4,064	4,326	4,558	4,856	
75	3,610	4,152	4,607	4,900	5,161	5,496	
76	4,036	4,641	5,148	5,475	5,766	6,139	
77	4,463	5,129	5,689	6,049	6,369	6,781	
78	4,955	5,698	6,319	6,718	7,075	7,527	
79	5,446	6,265	6,948	7,387	7,779	8,273	
80	5,937	6,833	7,577	8,055	8,483	9,019	
81	6,428	7,400	8,207	8,725	9,187	9,765	
82	6,919	7,968	8,836	9,393	9,893	10,509	
83	7,438	8,580	9,523	10,132	10,676	11,340	
84	7,955	9,190	10,211	10,871	11,461	12,171	
85	8,473	9,802	10,898	11,609	12,246	13,002	
86	8,990	10,413	11,585	12,348	13,029	13,831	
87	9,508	11,023	12,272	13,087	13,814	14,662	
88	9,873	11,471	12,793	13,658	14,435	15,329	
89	10,238	11,920	13,314	14,232	15,054	15,997	
90	10,603	12,368	13,834	14,803	15,673	16,664	
91	10,968	12,816	14,355	15,376	16,294	17,332	
92	11,334	13,264	14,877	15,949	16,913	17,999	
93	11,547	13,530	15,192	16,301	17,300	18,426	
94	11,760	13,797	15,507	16,652	17,688	18,852	
95	11,974	14,063	15,824	17,004	18,075	19,279	
96	12,187	14,329	16,140	17,355	18,462	19,705	
97+	12,400	14,596	16,456	17,706	18,850	20,131	

Current Rates

Continental General Insurance Company
Long Term Care Form 1LTCGP0001
Base Premiums for: \$150,000 Pool of Money, HHC Daily Max = 100% of NH
0-Day Elimination Period
Single Insured Annual Premiums *

Issue Age	----- Daily Max -----						
	<u>\$75/Day</u>	<u>\$100/Day</u>	<u>\$125/Day</u>	<u>\$150/Day</u>	<u>\$175/Day</u>	<u>\$200/Day</u>	
<38	320	347	377	393	415	435	* Joint applicants receive 15% discount.
38	337	367	399	416	441	461	
39	353	386	420	439	465	488	
40	370	406	444	464	491	516	
41	386	425	465	487	516	543	
42	403	444	487	510	541	569	Modal Factors Monthly: 0.09 Quarterly: 0.2625 Semiannual: 0.525
43	428	472	520	546	579	611	
44	452	503	553	580	618	651	
45	477	531	586	616	657	691	
46	501	560	619	651	694	733	
47	527	589	652	687	733	773	
48	541	608	675	711	760	804	
49	557	628	697	736	786	832	
50	573	647	720	760	814	861	
51	589	667	743	785	841	891	
52	605	685	766	809	868	920	
53	638	726	812	858	922	976	
54	672	765	857	906	973	1,032	
55	706	805	903	955	1,025	1,089	
56	740	844	948	1,002	1,079	1,146	
57	773	884	994	1,050	1,130	1,202	
58	854	979	1,102	1,165	1,256	1,336	
59	933	1,073	1,211	1,280	1,381	1,470	
60	1,014	1,168	1,319	1,395	1,506	1,604	
61	1,093	1,261	1,427	1,511	1,632	1,740	
62	1,174	1,356	1,536	1,626	1,758	1,873	
63	1,280	1,479	1,673	1,770	1,911	2,038	
64	1,387	1,600	1,810	1,912	2,065	2,200	
65	1,493	1,722	1,947	2,055	2,219	2,364	
66	1,600	1,843	2,084	2,199	2,373	2,527	
67	1,706	1,966	2,220	2,341	2,527	2,691	
68	1,909	2,206	2,496	2,629	2,840	3,027	
69	2,114	2,447	2,771	2,917	3,154	3,361	
70	2,318	2,687	3,046	3,205	3,466	3,696	
71	2,521	2,926	3,321	3,495	3,779	4,031	
72	2,726	3,167	3,594	3,783	4,092	4,366	
73	3,223	3,745	4,252	4,468	4,831	5,155	
74	3,720	4,326	4,909	5,154	5,571	5,944	
75	4,216	4,905	5,566	5,839	6,312	6,733	
76	4,713	5,484	6,222	6,525	7,050	7,523	
77	5,211	6,062	6,880	7,210	7,790	8,312	
78	5,784	6,738	7,649	8,014	8,656	9,238	
79	6,358	7,412	8,418	8,816	9,521	10,164	
80	6,931	8,087	9,189	9,618	10,387	11,089	
81	7,504	8,761	9,958	10,420	11,252	12,015	
82	8,077	9,436	10,727	11,222	12,118	12,940	
83	8,675	10,148	11,550	12,093	13,064	13,964	
84	9,272	10,860	12,372	12,964	14,011	14,986	
85	9,870	11,572	13,196	13,834	14,959	16,008	
86	10,467	12,285	14,020	14,705	15,905	17,031	
87	11,065	12,997	14,842	15,575	16,852	18,053	
88	11,471	13,487	15,425	16,209	17,559	18,829	
89	11,877	13,978	16,010	16,842	18,268	19,604	
90	12,283	14,469	16,593	17,477	18,975	20,380	
91	12,691	14,959	17,178	18,111	19,682	21,155	
92	13,097	15,450	17,761	18,744	20,389	21,931	
93	13,336	15,735	18,101	19,117	20,815	22,402	
94	13,576	16,020	18,442	19,492	21,240	22,872	
95	13,815	16,305	18,783	19,866	21,666	23,342	
96	14,056	16,590	19,123	20,241	22,091	23,812	
97+	14,295	16,875	19,464	20,615	22,517	24,283	

Current Rates

Continental General Insurance Company Long Term Care Form 1LTCGP0001 Base Premiums for: \$250,000 Pool of Money, HHC Daily Max = 100% of NH 0-Day Elimination Period Single Insured Annual Premiums *

Issue Age	----- Daily Max -----						
	<u>\$75/Day</u>	<u>\$100/Day</u>	<u>\$125/Day</u>	<u>\$150/Day</u>	<u>\$175/Day</u>	<u>\$200/Day</u>	
<38	262	296	314	329	350	370	* Joint applicants receive 15% discount.
38	276	313	333	350	372	394	
39	289	330	352	371	395	419	
40	303	347	371	391	417	443	Modal Factors Monthly: 0.09 Quarterly: 0.2625 Semiannual: 0.525
41	317	365	390	412	440	467	
42	331	382	410	432	462	491	
43	352	407	438	463	496	528	
44	372	432	467	494	530	564	
45	393	458	495	525	563	601	
46	413	483	524	556	597	638	
47	434	509	552	587	631	674	
48	447	526	572	609	655	701	
49	460	543	591	631	679	727	
50	472	560	611	653	704	754	
51	485	576	631	674	728	781	
52	498	593	650	696	752	807	
53	526	628	689	738	798	857	
54	553	662	728	780	843	907	
55	581	696	766	821	889	956	
56	608	730	805	863	934	1,006	
57	636	764	843	905	980	1,055	
58	701	846	935	1,005	1,089	1,174	
59	766	927	1,027	1,105	1,199	1,293	
60	832	1,008	1,119	1,205	1,308	1,412	
61	897	1,090	1,210	1,305	1,417	1,531	
62	962	1,171	1,302	1,404	1,527	1,650	
63	1,047	1,273	1,415	1,526	1,658	1,792	
64	1,133	1,376	1,528	1,647	1,789	1,933	
65	1,218	1,478	1,641	1,768	1,920	2,075	
66	1,304	1,580	1,754	1,889	2,051	2,216	
67	1,389	1,683	1,867	2,011	2,183	2,358	
68	1,554	1,888	2,098	2,261	2,456	2,655	
69	1,720	2,093	2,329	2,512	2,730	2,953	
70	1,885	2,298	2,560	2,763	3,004	3,250	
71	2,050	2,503	2,791	3,014	3,278	3,547	
72	2,216	2,709	3,022	3,265	3,552	3,844	
73	2,616	3,201	3,573	3,860	4,198	4,544	
74	3,017	3,693	4,123	4,455	4,844	5,243	
75	3,417	4,185	4,673	5,050	5,491	5,942	
76	3,818	4,677	5,223	5,645	6,137	6,641	
77	4,219	5,169	5,773	6,240	6,784	7,340	
78	4,680	5,743	6,418	6,941	7,546	8,165	
79	5,142	6,318	7,063	7,641	8,308	8,990	
80	5,603	6,893	7,708	8,342	9,070	9,814	
81	6,065	7,467	8,352	9,042	9,832	10,639	
82	6,526	8,042	8,997	9,742	10,593	11,464	
83	7,007	8,646	9,676	10,485	11,407	12,350	
84	7,487	9,250	10,355	11,227	12,220	13,236	
85	7,967	9,854	11,034	11,970	13,033	14,123	
86	8,447	10,458	11,712	12,712	13,847	15,009	
87	8,927	11,062	12,391	13,455	14,660	15,895	
88	9,256	11,475	12,848	13,957	15,218	16,515	
89	9,586	11,888	13,304	14,460	15,775	17,135	
90	9,915	12,301	13,760	14,962	16,333	17,754	
91	10,245	12,714	14,216	15,464	16,891	18,374	
92	10,574	13,127	14,673	15,966	17,448	18,994	
93	10,777	13,376	14,939	16,255	17,770	19,352	
94	10,979	13,625	15,206	16,543	18,091	19,710	
95	11,181	13,874	15,472	16,832	18,412	20,069	
96	11,383	14,123	15,738	17,120	18,734	20,427	
97+	11,585	14,372	16,005	17,408	19,055	20,785	

Proposed Rates

Continental General Insurance Company

Long Term Care Form 1LTCGP0001

Base Premiums for: \$10/Day NH, HHC Daily Max = 100% of NH

0-Day Elimination Period

Single Insured Annual Premiums *

Issue Age	Benefit Period							
	2-Year	3-Year	4-Year	5-Year	6-Year	8-Year	Lifetime	
<38	85	98	107	116	125	139	157	* Joint applicants receive 15% discount.
38	89	103	112	121	134	148	166	
39	94	107	121	125	139	157	175	
40	98	112	125	134	148	166	183	
41	103	121	130	139	152	170	192	Modal Factors Monthly: 0.09 Quarterly: 0.2625 Semiannual: 0.525
42	107	125	139	148	161	179	201	
43	112	130	148	157	170	192	215	
44	121	139	157	166	183	206	233	
45	125	148	166	175	192	215	246	
46	134	157	175	183	206	228	260	
47	139	166	183	197	215	242	273	
48	143	170	188	201	224	246	282	
49	148	175	192	206	228	255	291	
50	152	179	197	215	237	264	300	
51	157	183	206	219	242	273	309	
52	157	188	210	228	251	282	318	
53	166	201	224	242	264	295	336	
54	175	210	237	255	282	313	354	
55	183	224	246	268	295	327	371	
56	192	233	260	277	309	345	389	
57	201	246	273	291	322	362	407	
58	224	268	300	322	358	398	447	
59	246	295	331	354	394	439	492	
60	268	322	358	385	425	474	533	
61	286	349	389	416	461	515	577	
62	309	371	416	447	497	550	618	
63	340	407	456	488	537	600	671	
64	367	443	492	528	582	649	720	
65	394	474	528	568	626	698	774	
66	425	510	568	609	671	743	823	
67	452	546	604	649	712	792	877	
68	506	609	680	725	801	886	980	
69	559	676	752	805	886	984	1,087	
70	613	743	828	886	976	1,083	1,190	
71	667	805	899	962	1,061	1,177	1,293	
72	725	873	976	1,043	1,150	1,275	1,401	
73	855	1,034	1,155	1,235	1,356	1,504	1,651	
74	984	1,190	1,329	1,423	1,566	1,736	1,897	
75	1,114	1,351	1,508	1,615	1,777	1,964	2,148	
76	1,249	1,513	1,687	1,803	1,982	2,197	2,399	
77	1,378	1,669	1,866	1,996	2,193	2,425	2,645	
78	1,530	1,857	2,072	2,215	2,434	2,694	2,936	
79	1,678	2,041	2,282	2,439	2,680	2,967	3,222	
80	1,830	2,224	2,488	2,658	2,927	3,235	3,508	
81	1,982	2,412	2,694	2,882	3,168	3,504	3,795	
82	2,135	2,595	2,904	3,101	3,414	3,772	4,086	
83	2,296	2,797	3,124	3,334	3,669	4,054	4,381	
84	2,461	2,994	3,343	3,567	3,925	4,336	4,681	
85	2,627	3,191	3,562	3,799	4,180	4,618	4,981	
86	2,788	3,392	3,781	4,032	4,439	4,900	5,280	
87	2,953	3,589	4,001	4,265	4,694	5,182	5,580	
88	3,079	3,732	4,153	4,426	4,869	5,374	5,782	
89	3,209	3,875	4,305	4,582	5,039	5,571	5,983	
90	3,334	4,018	4,457	4,739	5,213	5,764	6,184	
91	3,459	4,162	4,605	4,896	5,388	5,956	6,386	
92	3,589	4,305	4,757	5,052	5,562	6,149	6,587	
93	3,665	4,390	4,846	5,146	5,665	6,269	6,712	
94	3,741	4,475	4,936	5,236	5,764	6,386	6,833	
95	3,822	4,560	5,021	5,330	5,867	6,502	6,959	
96	3,898	4,641	5,110	5,424	5,970	6,623	7,084	
97+	3,974	4,726	5,200	5,513	6,072	6,739	7,205	

Proposed Rates

Continental General Insurance Company

Long Term Care Form 1LTCGP0001

Base Premiums for: \$50,000 Pool of Money, HHC Daily Max = 100% of NH

0-Day Elimination Period

Single Insured Annual Premiums *

Issue	-----	Daily Max	-----	
<u>Age</u>	<u>\$75/Day</u>	<u>\$100/Day</u>	<u>\$125/Day</u>	
<38	716	756	788	* Joint applicants receive 15% discount.
38	743	792	828	
39	774	823	864	
40	805	859	899	
41	832	891	935	
42	864	926	971	Modal Factors
43	908	976	1,025	Monthly: 0.09
44	953	1,029	1,083	Quarterly: 0.2625
45	998	1,078	1,137	Semiannual: 0.525
46	1,047	1,132	1,190	
47	1,092	1,181	1,249	
48	1,114	1,213	1,280	
49	1,141	1,244	1,316	
50	1,168	1,275	1,347	
51	1,195	1,302	1,383	
52	1,217	1,334	1,414	
53	1,284	1,405	1,495	
54	1,347	1,481	1,571	
55	1,414	1,553	1,651	
56	1,477	1,624	1,727	
57	1,544	1,700	1,808	
58	1,692	1,871	1,991	
59	1,844	2,041	2,175	
60	1,996	2,211	2,358	
61	2,143	2,385	2,542	
62	2,296	2,555	2,725	
63	2,519	2,801	2,985	
64	2,743	3,047	3,244	
65	2,967	3,294	3,504	
66	3,195	3,540	3,763	
67	3,419	3,786	4,023	
68	3,808	4,224	4,488	
69	4,197	4,663	4,958	
70	4,587	5,101	5,424	
71	4,976	5,540	5,893	
72	5,365	5,979	6,359	
73	6,341	7,052	7,500	
74	7,312	8,131	8,637	
75	8,288	9,205	9,773	
76	9,259	10,283	10,910	
77	10,234	11,357	12,051	
78	11,331	12,575	13,335	
79	12,431	13,792	14,624	
80	13,528	15,009	15,913	
81	14,629	16,226	17,202	
82	15,725	17,443	18,486	
83	16,915	18,772	19,905	
84	18,101	20,101	21,323	
85	19,291	21,435	22,742	
86	20,477	22,764	24,160	
87	21,668	24,098	25,579	
88	22,603	25,180	26,747	
89	23,543	26,263	27,915	
90	24,478	27,346	29,083	
91	25,413	28,429	30,251	
92	26,353	29,512	31,419	
93	26,935	30,215	32,184	
94	27,516	30,917	32,944	
95	28,098	31,624	33,705	
96	28,680	32,327	34,470	
97+	29,266	33,029	35,231	

Proposed Rates

Continental General Insurance Company

Long Term Care Form 1LTCGP0001

Base Premiums for: \$75,000 Pool of Money,HHC Daily Max = 100% of NH

0-Day Elimination Period

Single Insured Annual Premiums *

Issue	Daily Max						
Age	\$75/Day	\$100/Day	\$125/Day	\$150/Day	\$175/Day	\$200/Day	
<38	805	864	908	940	976	1,002	* Joint applicants receive 15% discount.
38	841	908	953	989	1,029	1,061	
39	877	949	1,002	1,038	1,083	1,114	
40	913	993	1,047	1,083	1,132	1,168	Modal Factors Monthly: 0.09 Quarterly: 0.2625 Semiannual: 0.525
41	953	1,034	1,096	1,132	1,186	1,222	
42	989	1,078	1,141	1,181	1,240	1,275	
43	1,047	1,141	1,213	1,257	1,316	1,360	
44	1,101	1,208	1,280	1,334	1,396	1,441	
45	1,159	1,271	1,351	1,405	1,477	1,526	
46	1,213	1,338	1,423	1,481	1,557	1,607	
47	1,271	1,401	1,495	1,557	1,633	1,692	
48	1,307	1,441	1,539	1,607	1,687	1,745	
49	1,338	1,486	1,584	1,651	1,741	1,803	
50	1,374	1,526	1,629	1,700	1,794	1,857	
51	1,405	1,566	1,678	1,750	1,848	1,915	
52	1,441	1,607	1,723	1,799	1,902	1,969	
53	1,521	1,700	1,821	1,902	2,014	2,085	
54	1,598	1,790	1,920	2,009	2,121	2,202	
55	1,678	1,879	2,018	2,112	2,233	2,318	
56	1,759	1,973	2,117	2,215	2,345	2,430	
57	1,835	2,063	2,215	2,318	2,457	2,546	
58	2,023	2,278	2,448	2,564	2,716	2,819	
59	2,206	2,493	2,680	2,810	2,980	3,092	
60	2,394	2,707	2,913	3,056	3,244	3,365	
61	2,582	2,918	3,146	3,303	3,508	3,638	
62	2,766	3,132	3,379	3,544	3,768	3,916	
63	3,030	3,428	3,692	3,871	4,112	4,265	
64	3,289	3,719	4,005	4,193	4,453	4,618	
65	3,553	4,014	4,318	4,520	4,797	4,972	
66	3,817	4,305	4,627	4,842	5,137	5,325	
67	4,077	4,596	4,940	5,164	5,482	5,679	
68	4,555	5,146	5,531	5,782	6,140	6,363	
69	5,034	5,692	6,122	6,399	6,797	7,044	
70	5,513	6,238	6,712	7,012	7,455	7,728	
71	5,992	6,784	7,303	7,630	8,113	8,408	
72	6,471	7,330	7,889	8,247	8,771	9,093	
73	7,652	8,663	9,317	9,720	10,337	10,709	
74	8,834	9,993	10,744	11,196	11,903	12,324	
75	10,015	11,326	12,172	12,669	13,465	13,939	
76	11,196	12,655	13,599	14,145	15,031	15,555	
77	12,373	13,989	15,027	15,618	16,598	17,170	
78	13,729	15,519	16,669	17,305	18,392	19,027	
79	15,081	17,049	18,316	18,992	20,191	20,880	
80	16,432	18,580	19,958	20,679	21,985	22,737	
81	17,788	20,110	21,605	22,366	23,784	24,590	
82	19,139	21,641	23,247	24,053	25,579	26,442	
83	20,585	23,310	25,064	25,919	27,575	28,514	
84	22,030	24,975	26,876	27,785	29,570	30,586	
85	23,476	26,639	28,693	29,646	31,566	32,658	
86	24,921	28,308	30,510	31,512	33,562	34,725	
87	26,366	29,973	32,322	33,379	35,558	36,797	
88	27,436	31,253	33,754	34,882	37,182	38,498	
89	28,501	32,533	35,186	36,386	38,807	40,194	
90	29,570	33,813	36,618	37,894	40,427	41,894	
91	30,635	35,092	38,050	39,397	42,051	43,590	
92	31,705	36,372	39,482	40,905	43,675	45,291	
93	32,345	37,155	40,377	41,872	44,722	46,396	
94	32,980	37,943	41,272	42,843	45,770	47,501	
95	33,620	38,726	42,163	43,810	46,821	48,611	
96	34,260	39,514	43,058	44,781	47,868	49,717	
97+	34,896	40,297	43,948	45,747	48,920	50,822	

Proposed Rates

Continental General Insurance Company

Long Term Care Form 1LTCGP0001

Base Premiums for: \$100,000 Pool of Money, HHC Daily Max = 100% of NH

0-Day Elimination Period

Single Insured Annual Premiums *

Issue Age	----- Daily Max -----						
	<u>\$75/Day</u>	<u>\$100/Day</u>	<u>\$125/Day</u>	<u>\$150/Day</u>	<u>\$175/Day</u>	<u>\$200/Day</u>	
<38	873	949	1,016	1,061	1,101	1,146	* Joint applicants receive 15% discount.
38	913	998	1,070	1,119	1,163	1,213	
39	958	1,047	1,123	1,177	1,226	1,280	
40	998	1,096	1,181	1,240	1,289	1,347	
41	1,043	1,146	1,235	1,298	1,351	1,414	Modal Factors Monthly: 0.09 Quarterly: 0.2625 Semiannual: 0.525
42	1,083	1,195	1,289	1,356	1,414	1,481	
43	1,150	1,271	1,374	1,445	1,513	1,584	
44	1,213	1,347	1,459	1,535	1,607	1,687	
45	1,275	1,419	1,539	1,629	1,700	1,785	
46	1,342	1,495	1,624	1,718	1,799	1,888	
47	1,405	1,571	1,709	1,808	1,893	1,991	
48	1,445	1,620	1,763	1,871	1,960	2,063	
49	1,486	1,669	1,821	1,929	2,023	2,135	
50	1,526	1,718	1,879	1,991	2,090	2,202	
51	1,566	1,763	1,933	2,054	2,157	2,273	
52	1,602	1,812	1,991	2,117	2,224	2,345	
53	1,692	1,920	2,108	2,242	2,354	2,488	
54	1,781	2,023	2,224	2,367	2,488	2,631	
55	1,871	2,126	2,340	2,493	2,622	2,774	
56	1,960	2,229	2,457	2,618	2,752	2,913	
57	2,050	2,336	2,573	2,743	2,886	3,056	
58	2,260	2,582	2,851	3,038	3,200	3,396	
59	2,470	2,828	3,128	3,334	3,517	3,732	
60	2,680	3,074	3,405	3,634	3,831	4,068	
61	2,891	3,320	3,683	3,929	4,144	4,408	
62	3,101	3,567	3,960	4,229	4,462	4,743	
63	3,388	3,893	4,318	4,609	4,860	5,169	
64	3,678	4,220	4,681	4,990	5,258	5,594	
65	3,965	4,551	5,039	5,370	5,656	6,019	
66	4,256	4,878	5,401	5,750	6,059	6,444	
67	4,542	5,204	5,759	6,131	6,457	6,869	
68	5,084	5,831	6,462	6,878	7,249	7,715	
69	5,625	6,457	7,160	7,625	8,037	8,561	
70	6,162	7,084	7,862	8,373	8,829	9,406	
71	6,703	7,710	8,565	9,120	9,617	10,252	
72	7,240	8,337	9,263	9,867	10,409	11,098	
73	8,569	9,858	10,946	11,657	12,284	13,094	
74	9,894	11,380	12,628	13,443	14,163	15,089	
75	11,219	12,901	14,315	15,228	16,038	17,081	
76	12,543	14,423	15,998	17,014	17,918	19,077	
77	13,868	15,940	17,680	18,799	19,793	21,072	
78	15,398	17,707	19,636	20,876	21,985	23,390	
79	16,924	19,470	21,592	22,956	24,174	25,708	
80	18,450	21,234	23,547	25,033	26,362	28,027	
81	19,976	22,997	25,503	27,114	28,550	30,345	
82	21,502	24,760	27,458	29,190	30,743	32,658	
83	23,113	26,662	29,593	31,486	33,177	35,240	
84	24,720	28,559	31,732	33,781	35,616	37,822	
85	26,331	30,461	33,866	36,077	38,055	40,404	
86	27,937	32,358	36,001	38,373	40,489	42,982	
87	29,548	34,256	38,135	40,668	42,928	45,564	
88	30,680	35,647	39,755	42,445	44,857	47,636	
89	31,817	37,044	41,375	44,226	46,781	49,712	
90	32,949	38,435	42,991	46,002	48,705	51,784	
91	34,086	39,827	44,611	47,783	50,634	53,860	
92	35,222	41,219	46,231	49,564	52,558	55,932	
93	35,884	42,046	47,211	50,656	53,762	57,261	
94	36,547	42,874	48,191	51,748	54,966	58,586	
95	37,209	43,702	49,175	52,840	56,169	59,910	
96	37,871	44,530	50,155	53,932	57,373	61,235	
97+	38,534	45,358	51,140	55,024	58,577	62,560	

Proposed Rates

Continental General Insurance Company

Long Term Care Form 1LTCGP0001

Base Premiums for: \$150,000 Pool of Money, HHC Daily Max = 100% of NH

0-Day Elimination Period

Single Insured Annual Premiums *

Issue Age	----- Daily Max -----						
	<u>\$75/Day</u>	<u>\$100/Day</u>	<u>\$125/Day</u>	<u>\$150/Day</u>	<u>\$175/Day</u>	<u>\$200/Day</u>	
<38	993	1,078	1,172	1,222	1,289	1,351	* Joint applicants receive 15% discount.
38	1,047	1,141	1,240	1,293	1,369	1,432	
39	1,096	1,199	1,307	1,365	1,445	1,517	
40	1,150	1,262	1,378	1,441	1,526	1,602	Modal Factors Monthly: 0.09 Quarterly: 0.2625 Semiannual: 0.525
41	1,199	1,320	1,445	1,513	1,602	1,687	
42	1,253	1,378	1,513	1,584	1,683	1,768	
43	1,329	1,468	1,615	1,696	1,799	1,897	
44	1,405	1,562	1,718	1,803	1,920	2,023	
45	1,481	1,651	1,821	1,915	2,041	2,148	
46	1,557	1,741	1,924	2,023	2,157	2,278	
47	1,638	1,830	2,027	2,135	2,278	2,403	
48	1,683	1,888	2,099	2,211	2,363	2,497	
49	1,732	1,951	2,166	2,287	2,443	2,587	
50	1,781	2,009	2,237	2,363	2,528	2,676	
51	1,830	2,072	2,309	2,439	2,613	2,770	
52	1,879	2,130	2,381	2,515	2,698	2,859	
53	1,982	2,255	2,524	2,667	2,864	3,034	
54	2,090	2,376	2,663	2,815	3,025	3,209	
55	2,193	2,501	2,806	2,967	3,186	3,383	
56	2,300	2,622	2,945	3,115	3,352	3,562	
57	2,403	2,748	3,088	3,262	3,513	3,737	
58	2,654	3,043	3,423	3,620	3,902	4,153	
59	2,900	3,334	3,763	3,978	4,291	4,569	
60	3,150	3,629	4,099	4,336	4,681	4,985	
61	3,396	3,920	4,435	4,694	5,070	5,406	
62	3,647	4,215	4,775	5,052	5,464	5,822	
63	3,978	4,596	5,200	5,500	5,938	6,332	
64	4,309	4,972	5,625	5,943	6,417	6,838	
65	4,641	5,352	6,050	6,386	6,896	7,348	
66	4,972	5,728	6,475	6,833	7,375	7,854	
67	5,303	6,108	6,900	7,276	7,854	8,364	
68	5,934	6,856	7,755	8,171	8,825	9,406	
69	6,569	7,603	8,610	9,066	9,800	10,444	
70	7,205	8,350	9,464	9,961	10,771	11,487	
71	7,836	9,093	10,319	10,861	11,742	12,525	
72	8,471	9,840	11,169	11,756	12,718	13,568	
73	10,015	11,639	13,214	13,886	15,013	16,020	
74	11,559	13,443	15,255	16,016	17,314	18,473	
75	13,103	15,242	17,296	18,146	19,614	20,925	
76	14,646	17,041	19,336	20,276	21,909	23,377	
77	16,195	18,839	21,381	22,406	24,209	25,829	
78	17,976	20,938	23,771	24,903	26,899	28,707	
79	19,757	23,032	26,160	27,396	29,588	31,584	
80	21,538	25,131	28,555	29,888	32,278	34,461	
81	23,319	27,226	30,944	32,381	34,967	37,339	
82	25,100	29,324	33,334	34,873	37,657	40,212	
83	26,957	31,535	35,893	37,580	40,597	43,393	
84	28,814	33,750	38,449	40,288	43,541	46,571	
85	30,671	35,961	41,008	42,991	46,486	49,748	
86	32,528	38,176	43,568	45,698	49,426	52,925	
87	34,385	40,391	46,123	48,401	52,370	56,102	
88	35,647	41,912	47,935	50,370	54,567	58,514	
89	36,909	43,438	49,752	52,339	56,769	60,922	
90	38,171	44,964	51,565	54,312	58,966	63,334	
91	39,438	46,486	53,381	56,281	61,163	65,741	
92	40,700	48,012	55,194	58,250	63,361	68,153	
93	41,442	48,898	56,250	59,409	64,685	69,617	
94	42,190	49,784	57,310	60,573	66,005	71,075	
95	42,933	50,670	58,371	61,736	67,330	72,539	
96	43,680	51,556	59,427	62,900	68,650	73,998	
97+	44,423	52,442	60,488	64,063	69,975	75,461	

Proposed Rates

Continental General Insurance Company

Long Term Care Form 1LTCGP0001

Base Premiums for: \$250,000 Pool of Money, HHC Daily Max = 100% of NH

0-Day Elimination Period

Single Insured Annual Premiums *

Issue Age	----- Daily Max -----						
	<u>\$75/Day</u>	<u>\$100/Day</u>	<u>\$125/Day</u>	<u>\$150/Day</u>	<u>\$175/Day</u>	<u>\$200/Day</u>	
<38	814	920	976	1,022	1,088	1,150	* Joint applicants receive 15% discount.
38	858	973	1,035	1,088	1,156	1,224	
39	898	1,026	1,094	1,153	1,227	1,302	
40	942	1,078	1,153	1,215	1,296	1,377	Modal Factors Monthly: 0.09 Quarterly: 0.2625 Semiannual: 0.525
41	985	1,134	1,212	1,280	1,367	1,451	
42	1,029	1,187	1,274	1,342	1,436	1,526	
43	1,094	1,265	1,361	1,439	1,541	1,641	
44	1,156	1,342	1,451	1,535	1,647	1,753	
45	1,221	1,423	1,538	1,631	1,750	1,868	
46	1,283	1,501	1,628	1,728	1,855	1,983	
47	1,349	1,582	1,715	1,824	1,961	2,095	
48	1,389	1,635	1,778	1,893	2,035	2,178	
49	1,429	1,687	1,837	1,961	2,110	2,259	
50	1,467	1,740	1,899	2,029	2,188	2,343	
51	1,507	1,790	1,961	2,095	2,262	2,427	
52	1,548	1,843	2,020	2,163	2,337	2,508	
53	1,635	1,952	2,141	2,293	2,480	2,663	
54	1,718	2,057	2,262	2,424	2,620	2,819	
55	1,806	2,163	2,380	2,551	2,763	2,971	
56	1,889	2,269	2,502	2,682	2,902	3,126	
57	1,976	2,374	2,620	2,812	3,045	3,279	
58	2,178	2,629	2,906	3,123	3,384	3,648	
59	2,380	2,881	3,191	3,434	3,726	4,018	
60	2,586	3,132	3,477	3,745	4,065	4,388	
61	2,788	3,387	3,760	4,055	4,403	4,758	
62	2,990	3,639	4,046	4,363	4,745	5,128	
63	3,254	3,956	4,397	4,742	5,152	5,569	
64	3,521	4,276	4,748	5,118	5,559	6,007	
65	3,785	4,593	5,100	5,494	5,967	6,448	
66	4,052	4,910	5,451	5,870	6,374	6,886	
67	4,316	5,230	5,802	6,249	6,784	7,328	
68	4,829	5,867	6,520	7,026	7,632	8,251	
69	5,345	6,504	7,238	7,806	8,484	9,177	
70	5,858	7,141	7,955	8,586	9,335	10,100	
71	6,371	7,778	8,673	9,366	10,187	11,023	
72	6,886	8,418	9,391	10,146	11,038	11,946	
73	8,129	9,947	11,103	11,995	13,046	14,121	
74	9,376	11,476	12,813	13,844	15,053	16,293	
75	10,619	13,005	14,522	15,693	17,064	18,465	
76	11,865	14,534	16,231	17,542	19,071	20,638	
77	13,111	16,063	17,940	19,391	21,082	22,810	
78	14,544	17,847	19,945	21,570	23,450	25,373	
79	15,979	19,634	21,949	23,745	25,818	27,937	
80	17,412	21,421	23,953	25,924	28,186	30,498	
81	18,848	23,204	25,955	28,099	30,554	33,062	
82	20,280	24,991	27,959	30,274	32,919	35,625	
83	21,775	26,868	30,069	32,583	35,448	38,379	
84	23,267	28,745	32,179	34,889	37,975	41,132	
85	24,758	30,622	34,289	37,198	40,501	43,889	
86	26,250	32,499	36,396	39,504	43,031	46,642	
87	27,741	34,376	38,506	41,813	45,557	49,395	
88	28,764	35,660	39,926	43,373	47,291	51,322	
89	29,789	36,943	41,343	44,936	49,022	53,249	
90	30,812	38,227	42,760	46,496	50,756	55,172	
91	31,837	39,510	44,178	48,056	52,490	57,099	
92	32,860	40,793	45,598	49,616	54,221	59,026	
93	33,491	41,567	46,424	50,514	55,222	60,138	
94	34,118	42,341	47,254	51,409	56,219	61,251	
95	34,746	43,115	48,081	52,307	57,217	62,366	
96	35,374	43,889	48,907	53,202	58,218	63,479	
97+	36,001	44,662	49,737	54,097	59,215	64,591	

Continental General Insurance Company
Long Term Care Forms 1LTCGP0001 and 1LTCGP0008
Factors to Apply to Base Rates (HHC Daily
Max = 100% of NH) to Get:

Issue	HHC Daily	HHC Daily	No HHC
<u>Age</u>	<u>Max = 75% of NH</u>	<u>Max = 50% of NH</u>	<u>Coverage</u>
	(Form 1LTCGP0001)	(Form 1LTCGP0001)	(Form 1LTCGP0008)
<38	0.94	0.88	0.70
38	0.94	0.88	0.70
39	0.94	0.87	0.70
40	0.94	0.87	0.70
41	0.94	0.87	0.69
42	0.94	0.87	0.69
43	0.93	0.87	0.69
44	0.93	0.87	0.69
45	0.93	0.87	0.69
46	0.93	0.87	0.69
47	0.93	0.86	0.68
48	0.93	0.86	0.68
49	0.93	0.86	0.68
50	0.93	0.86	0.68
51	0.93	0.86	0.68
52	0.93	0.86	0.68
53	0.93	0.86	0.68
54	0.93	0.86	0.68
55	0.93	0.86	0.69
56	0.93	0.86	0.69
57	0.93	0.86	0.69
58	0.93	0.86	0.69
59	0.93	0.86	0.70
60	0.93	0.87	0.70
61	0.93	0.87	0.70
62	0.93	0.87	0.71
63	0.94	0.87	0.71
64	0.94	0.87	0.72
65	0.94	0.88	0.73
66	0.94	0.88	0.74
67	0.94	0.88	0.74
68	0.94	0.88	0.75
69	0.94	0.89	0.75
70	0.94	0.89	0.75
71	0.94	0.89	0.76
72	0.95	0.89	0.76
73	0.95	0.89	0.77
74	0.95	0.89	0.77
75	0.95	0.90	0.78
76	0.95	0.90	0.78
77	0.95	0.90	0.79
78	0.95	0.90	0.79
79	0.95	0.90	0.79
80	0.95	0.90	0.79
81	0.95	0.91	0.80
82	0.95	0.91	0.80
83	0.95	0.91	0.80
84	0.95	0.91	0.81
85	0.95	0.91	0.81
86	0.95	0.91	0.81
87	0.96	0.91	0.81
88	0.96	0.91	0.82
89	0.96	0.91	0.82
90	0.96	0.92	0.82
91	0.96	0.92	0.83
92	0.96	0.92	0.83
93	0.96	0.92	0.83
94	0.96	0.92	0.84
95	0.96	0.92	0.84
96	0.96	0.92	0.84
97+	0.96	0.93	0.85

Continental General Insurance Company
Long Term Care Forms 1LTCGP0001 and 1LTCGP0008
Factors to Apply to Base Rates to Add:

Issue Age	Compound Inflation	Simple Inflation	Benefit Increase (Guaranteed Purchase) Option
<38	2.25	1.55	1.03
38	2.25	1.55	1.03
39	2.25	1.55	1.03
40	2.25	1.55	1.03
41	2.25	1.55	1.03
42	2.25	1.55	1.03
43	2.23	1.55	1.03
44	2.21	1.55	1.03
45	2.19	1.55	1.03
46	2.17	1.55	1.03
47	2.15	1.55	1.03
48	2.13	1.55	1.03
49	2.11	1.55	1.03
50	2.09	1.55	1.03
51	2.07	1.55	1.03
52	2.05	1.55	1.03
53	2.03	1.55	1.03
54	2.01	1.55	1.03
55	1.99	1.55	1.03
56	1.97	1.55	1.03
57	1.95	1.55	1.03
58	1.94	1.55	1.03
59	1.93	1.55	1.03
60	1.92	1.55	1.03
61	1.91	1.55	1.03
62	1.90	1.55	1.03
63	1.88	1.54	1.03
64	1.86	1.53	1.03
65	1.84	1.52	1.03
66	1.82	1.51	1.03
67	1.80	1.50	1.03
68	1.77	1.50	1.03
69	1.74	1.50	1.03
70	1.71	1.50	1.03
71	1.68	1.50	1.03
72	1.65	1.50	1.03
73	1.61	1.48	1.03
74	1.57	1.46	1.03
75	1.53	1.44	1.03
76	1.49	1.42	1.03
77	1.45	1.40	1.03
78	1.43	1.38	1.03
79	1.41	1.36	1.03
80	1.39	1.34	1.03
81	1.37	1.32	1.03
82	1.35	1.30	1.03
83	1.33	1.29	1.03
84	1.31	1.28	1.03
85	1.29	1.27	1.03
86	1.27	1.26	1.03
87	1.25	1.25	1.03
88	1.24	1.24	1.03
89	1.23	1.23	1.03
90	1.22	1.22	1.03
91	1.21	1.21	1.03
92	1.20	1.20	1.03
93	1.20	1.20	1.03
94	1.19	1.19	1.03
95	1.19	1.19	1.03
96	1.18	1.18	1.03
97+	1.18	1.18	1.03

Continental General Insurance Company
Long Term Care Forms 1LTCGP0001 and 1LTCGP0008
Factors to Apply to Base 0-Day Elimination
Period Rates to Get:

Issue <u>Age</u>	----- Elimination Period of: -----			
	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>	<u>180-Day</u>
<38	0.97	0.92	0.90	0.85
38	0.97	0.92	0.89	0.85
39	0.97	0.92	0.89	0.84
40	0.97	0.92	0.89	0.84
41	0.97	0.92	0.88	0.83
42	0.97	0.91	0.88	0.83
43	0.97	0.91	0.88	0.82
44	0.96	0.91	0.88	0.82
45	0.96	0.91	0.87	0.82
46	0.96	0.91	0.87	0.81
47	0.96	0.90	0.87	0.81
48	0.96	0.90	0.87	0.81
49	0.96	0.90	0.86	0.80
50	0.96	0.90	0.86	0.80
51	0.96	0.90	0.86	0.79
52	0.96	0.90	0.86	0.79
53	0.96	0.90	0.86	0.79
54	0.96	0.90	0.85	0.79
55	0.96	0.89	0.85	0.79
56	0.96	0.89	0.85	0.78
57	0.96	0.89	0.85	0.78
58	0.96	0.89	0.85	0.78
59	0.96	0.89	0.85	0.78
60	0.96	0.89	0.85	0.78
61	0.96	0.89	0.84	0.77
62	0.96	0.89	0.84	0.77
63	0.96	0.89	0.84	0.77
64	0.96	0.89	0.85	0.77
65	0.96	0.89	0.85	0.78
66	0.96	0.89	0.85	0.78
67	0.96	0.89	0.85	0.78
68	0.96	0.89	0.85	0.78
69	0.96	0.89	0.85	0.78
70	0.96	0.89	0.85	0.78
71	0.96	0.89	0.85	0.78
72	0.96	0.89	0.85	0.77
73	0.96	0.89	0.85	0.77
74	0.96	0.89	0.85	0.78
75	0.96	0.89	0.85	0.78
76	0.96	0.89	0.85	0.78
77	0.96	0.89	0.85	0.78
78	0.96	0.89	0.85	0.78
79	0.96	0.89	0.85	0.78
80	0.96	0.89	0.85	0.78
81	0.96	0.89	0.85	0.78
82	0.96	0.89	0.85	0.78
83	0.96	0.89	0.85	0.77
84	0.96	0.89	0.84	0.77
85	0.96	0.89	0.84	0.77
86	0.96	0.89	0.84	0.77
87	0.96	0.89	0.84	0.77
88	0.96	0.89	0.84	0.76
89	0.96	0.89	0.84	0.76
90	0.96	0.88	0.84	0.76
91	0.95	0.88	0.84	0.76
92	0.95	0.88	0.83	0.75
93	0.95	0.88	0.83	0.75
94	0.95	0.88	0.83	0.75
95	0.95	0.88	0.83	0.75
96	0.95	0.88	0.83	0.75
97+	0.95	0.88	0.83	0.75

Continental General Insurance Company
Long Term Care Forms 1LTCGP0001 and 1LTCGP0008
Factors to Apply to Base Rates to Add:

Issue Age	Shortened Benefit Period (Non-forfeiture)
<38	1.15
38	1.15
39	1.15
40	1.15
41	1.15
42	1.15
43	1.15
44	1.15
45	1.15
46	1.15
47	1.15
48	1.15
49	1.15
50	1.15
51	1.15
52	1.15
53	1.15
54	1.15
55	1.15
56	1.15
57	1.15
58	1.15
59	1.15
60	1.14
61	1.14
62	1.14
63	1.14
64	1.14
65	1.13
66	1.13
67	1.13
68	1.13
69	1.13
70	1.12
71	1.12
72	1.12
73	1.11
74	1.11
75	1.10
76	1.10
77	1.09
78	1.08
79	1.08
80	1.07
81	1.07
82	1.06
83	1.06
84	1.06
85	1.05
86	1.05
87	1.05
88	1.05
89	1.05
90	1.05
91	1.05
92	1.05
93	1.05
94	1.05
95	1.05
96	1.05
97+	1.05

Continental General Insurance Company
Long Term Care Forms 1LTCGP0001 and 1LTCGP0008
Factors to Apply to Base Rates to:

Issue Age	Add Guaranteed Issue for Actively- at-Work-Employees	Change to 3 of 6 ADL's	Remove 15% Spouse Disc.	Change to 20% Spouse Disc.	Add 10-Year Survivorship	Add WOP on Home Health	Reduce / Increase Renewal Comm. *
<40	1.05	0.90	0.89	1.04	1.01	1.01	0.94 / 1.06
40-44	1.05	0.90	0.89	1.04	1.01	1.01	0.94 / 1.06
45-49	1.05	0.90	0.89	1.04	1.01	1.01	0.94 / 1.06
50-54	1.05	0.90	0.89	1.04	1.01	1.01	0.94 / 1.06
55-59	1.05	0.90	0.90	1.04	1.01	1.01	0.94 / 1.06
60-64	1.05	0.91	0.90	1.04	1.01	1.01	0.94 / 1.06
65-69	1.05	0.92	0.92	1.03	1.01	1.01	0.94 / 1.06
70-74	1.05	0.92	0.93	1.03	1.01	1.01	0.94 / 1.06
75-79	1.05	0.92	0.94	1.02	1.01	1.02	0.94 / 1.06
80-84	1.05	0.93	0.96	1.01	1.01	1.03	0.94 / 1.06
85-89	1.05	0.95	0.98	1.01	1.01	1.03	0.94 / 1.06
90-94	1.05	0.95	0.98	1.01	1.01	1.03	0.94 / 1.06
95+	1.05	0.95	0.98	1.01	1.01	1.03	0.94 / 1.06

Issue Age	Reduce / Increase New Comm. *	Add Restoration
<40	0.99 / 1.01	1.01
40-44	0.99 / 1.01	1.01
45-49	0.99 / 1.01	1.01
50-54	0.99 / 1.01	1.01
55-59	0.99 / 1.01	1.01
60-64	0.99 / 1.01	1.01
65-69	0.99 / 1.01	1.01
70-74	0.99 / 1.01	1.01
75-79	0.99 / 1.01	1.01
80-84	0.99 / 1.01	1.01
85-89	0.99 / 1.01	1.01
90-94	0.99 / 1.01	1.01
95+	0.99 / 1.01	1.01

* Factors shown are for each 5 percentage points reduction / increase in commissions. Reductions / increases of other magnitudes would have proportional factors.
Note: no change will be made to the writing agent which would result in first year commissions exceeding 50% or renewal commissions exceeding 10%.

State:	Pennsylvania	Filing Company:	Continental General Insurance Company
TOI/Sub-TOI:	LTC03G Group Long Term Care/LTC03G.001 Qualified		
Product Name:	Long Term Care		
Project Name/Number:	GALIC Forms Rate Increase Filing for 2017/		

Supporting Document Schedules

Bypassed - Item:	Transmittal Letter (A&H)
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Actuarial Certification (A&H)
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Actuarial Memorandum and Explanatory Information (A&H)
Comments:	
Attachment(s):	GALIC Act Memo & Appx PA GRP.pdf PA Exhibits - 1LTGCG.pdf
Item Status:	
Status Date:	

Bypassed - Item:	Advertisements (A&H)
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Authorization to File (A&H)
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Insert Page Explanation (A&H)
Bypass Reason:	N/A
Attachment(s):	
Item Status:	

State:	Pennsylvania	Filing Company:	Continental General Insurance Company
TOI/Sub-TOI:	LTC03G Group Long Term Care/LTC03G.001 Qualified		
Product Name:	Long Term Care		
Project Name/Number:	GALIC Forms Rate Increase Filing for 2017/		

Status Date:	
Bypassed - Item:	Rate Table (A&H)
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	Replacement Form with Highlighted Changes (A&H)
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	
Satisfied - Item:	Reserve Calculation (A&H)
Comments:	Please see section "12. CLAIM LIABILITY AND RESERVE" of the Actuarial Memorandum
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	Variability Explanation (A&H)
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	
Satisfied - Item:	Cover Letter
Comments:	
Attachment(s):	Cover Letter Grp only PA.pdf
Item Status:	
Status Date:	

Continental General Insurance Company

P.O. Box 203098
Austin, Texas 78720-3098

**Actuarial Memorandum Supporting Rate Revisions for
Long Term Care Insurance Base Policy Forms and Riders Associated with
1LTCGP0001-PA, 1LTCGP0008-PA**

1. SCOPE AND PURPOSE

The purpose of this memorandum is to provide actuarial information supporting a rate revision to the Base Policy Forms and Riders of the Continental General Insurance Company (the Company) long-term care (LTC) policy forms referenced above.

These policies were originally sold under the name Great American Life Insurance Company (GALIC). Virtually all of the GALIC policies have been novated into United Teacher Associates (UTA), and the remaining GALIC policies are 100% ceded to UTA. All policies issued in Florida are 100% ceded to GALIC and therefore are excluded from this analysis. Effective December 31, 2016, UTA (inactive NAIC No: 63479) merged into Continental General Insurance Company (active NAIC No: 71404).

Some riders may not be available in all states. The issue date range that these forms were sold in this state is shown in Appendix A.

These forms are no longer being marketed in any state and the Company is no longer selling any new Long-Term Care Insurance.

The Company is requesting a 210.8% rate increase in your state at this time.

This rate filing is not intended to be used for other purposes.

The body of this actuarial memorandum was written to apply to each state where these products were issued. Any reference to information that is specific to a particular state is included in Appendix A.

2. POLICYHOLDER OPTIONS TO MITIGATE IMPACT OF PREMIUM RATE INCREASE

Optional Policyholder offers to Reduce Benefits

The Company will give policyholders Benefit Reduction Offers to help mitigate the impact to policyholders of the premium rate increase on the base policy and riders. The Benefit Reduction Offers will allow the policyholder to:

1. Lower their lifetime maximum benefit,
2. Lower their daily benefit, or
3. Increase their elimination period.

Non-forfeiture Offers

In addition, the Company will give the policyholder the option to accept a shortened benefit period.

Acceptance of the non-forfeiture benefit will provide the policyholder with a paid-up policy, with no future premiums required. Under this paid-up policy, the maximum benefit amount is equal to the greater of the sum of premiums paid or 30 times their daily benefit, and the daily benefit amount is equal to the policyholder's current daily benefit amount. This non-forfeiture benefit shall not exceed the policyholder's remaining unused Maximum Lifetime Benefit at the time of conversion. Upon acceptance of this offer, an endorsement reflecting the non-forfeiture benefit will be sent to the policyholder. This offer will be made to all policyholders.

3. PREMIUM RATE INCREASE JUSTIFICATION

This rate revision is necessary because the current best estimate projections of the nationwide lifetime loss ratios are in excess of expected. Policies were issued nationwide under both loss ratio requirements and under rate stabilization requirements established in the 2000 LTC NAIC Model Regulation.

The lifetime loss ratio anticipated at the time of original pricing for these policy forms was 66.5%. This loss ratio has been stated based on the pricing interest rate. Based on available documentation, the pricing loss ratio stated below is conservatively assumed to be representative of best estimate expectations.

For policies issued under loss ratio requirements, the lifetime loss ratio that these products were initially priced to has been exceeded. For policies issued under rate stabilization requirements, the margin for moderately adverse deviation built into the rates at the time of original pricing was a 10% deviation in the lifetime loss ratio, when compared to originally expected. This margin has been exceeded. The current Nationwide lifetime loss ratio is demonstrated in Exhibit 3.

The rate increase has been calculated to account for the State's specific rate increase history. Experience adjusted to reflect the State's specific rate increase history, both with and without the impact of the requested rate increase, is contained in Exhibit 4. Exhibit 4 demonstrates that the anticipated lifetime loss ratio with the requested rate increase is in excess of the minimum loss ratio of 60% as well as greater than the original pricing loss ratio.

Additionally, Exhibit 4 demonstrates that given moderately adverse experience, the sum of the accumulated value of incurred claims without the inclusion of active life reserves, and the present value of future projected incurred claims, without the inclusion of active life reserves, will not be less than the sum of the following:

1. Accumulated value of the initial earned premium times the original assumed lifetime loss ratio (which was higher than 58%),
2. 85% of the accumulated value of prior premium rate schedule increases
3. Present value of future projected initial earned premium times the original assumed lifetime loss ratio, and
4. 85% of the present value of future projected premium in excess of the projected initial earned premium.

4. DESCRIPTION OF BENEFITS

Appendix B contains a brief summary of the benefits contained in these base forms and associated riders. A complete description of the benefit provisions and conditions for eligibility is contained in the policy forms and riders on file with the state.

5. RENEWABILITY CLAUSE

1LTCGP0001 and 1LTCGP0008 are Guaranteed Renewable, Group Long-Term Care policies.

6. MARKETING METHOD

Forms 1LTCGP0001 and 1LTCGP0008 were marketed to groups and then offered to individual employees by direct marketing methods. These products are not currently being marketed.

7. APPLICABILITY

The revised rates contained in this memorandum will be applicable to all renewals of the policy form and riders described in Section 1 as well as all future periodic inflation protection offers. The current and revised premium rate schedules are attached. The rate revision will be applied as a consistent percentage to all premium classes. The modal premium factors will remain unchanged from the current factors.

8. PROPOSED EFFECTIVE DATE

This rate will be implemented as soon as possible after approval has been granted as allowed based on regulation.

9. UNDERWRITING

Most policies subject to this rate revision were subject to full medical underwriting in accordance with Company standards in place at the time of issue. Some certificates sold under 1LTCG0001 and 1LTCG0008 were guaranteed issue or subject to simplified underwriting. The underwriting standards used were taken into consideration when projecting future experience.

10. ACTUARIAL ASSUMPTIONS

The actuarial assumptions used to project the future premiums and claims are described in this section. Appendix D provides further details of the experience studies conducted that were used to develop the actuarial assumptions. These base assumptions are the same as the assumptions being used in the Company's internal cash flow testing.

A. Morbidity

The morbidity assumptions are based on a combination of the Company's historical claim experience on these forms from 2006 through 6/30/2016, the Milliman 2014 Long-Term Care Guidelines (Guidelines) and judgment. The Guidelines reflect over \$25 billion of insured data and the experience and judgment of Milliman actuaries. The claim cost assumptions reflect the Company's current best estimate of future morbidity. In setting the morbidity assumptions, the policy design, underwriting and claim adjudication

practices have been taken into consideration. The baseline assumptions do not include any adverse selection resulting from the rate increase, loads for moderately adverse experience, or future morbidity improvement.

B. Mortality

The best estimate future mortality assumption is 100% of the Annuity 2000 Basic Table with mortality steepening factors applied, historical mortality improvement, and selection factors. Historical mortality improvement was assumed equal to 0.6% per year, with 2000 as the central year. The mortality assumption, including selection factors and historical mortality improvement, is based on industry expectations.

C. Voluntary Lapse

The voluntary lapse assumptions were developed from a policy persistency study conducted on the Company's experience on these forms and judgment. Lapse rates are combined with mortality rates to derive the total termination rate. In addition, benefit exhaust rates were calculated and added, to reflect policy termination when a person exhausts his benefit period. We assumed all remaining policies would terminate at attained age 120. The lapse assumptions represent the best estimate expectations of future experience and do not include any provisions for adverse experience. Voluntary lapse rates vary by marital status and inflation versus non-inflation. The table below shows the detailed voluntary lapse assumptions for the applicable projected policy durations.

Voluntary Lapse Rate				
	Married		Single	
Duration	Inflation	Non-Inflation	Inflation	Non-Inflation
7	0.98%	1.63%	1.69%	3.85%
8	0.73%	1.16%	1.14%	3.53%
9	0.73%	0.93%	1.14%	3.21%
10	0.49%	0.70%	1.40%	2.57%
11	0.44%	0.63%	1.26%	2.31%
12	0.39%	0.56%	1.12%	2.05%
13	0.34%	0.49%	0.98%	1.80%
14	0.29%	0.42%	0.84%	1.54%
15+	0.24%	0.35%	0.70%	1.28%

Additional multiplier to apply to Lapse Rates for Gender	
Gender	Multiplier
Female	85.0%
Male	135.0%

D. Interest Rate

The supporting exhibits use the maximum valuation interest rate for contract reserves to calculate the lifetime loss ratio. This is consistent with the guidance provided in the Senior Issues Task Force Model Bulletin and the requirements established in the 2000 LTC NAIC Model regulation. The maximum valuation interest rate applied to these policies is 4.5%.

E. Expenses

The need for a rate increase is based on the lifetime loss ratio being in excess of expected. Expenses do not directly impact the lifetime loss ratio. As such, expenses are not being projected and are not included in this filing.

F. Policyholder Behavior Due to the Rate Increase

Shock Lapse

At the time the proposed premium rate increases become effective, there is additional shock lapse in the amount of 10.0%. The shock lapse is in addition to the base lapse assumption for that projection period. The shock lapse effect of the rate increase is assumed to temporarily increase voluntary lapses in the year that the rate increase is implemented. This percentage is reflected in the projected future experience after the proposed rate increase in Exhibit 4 and Exhibit 5.

Benefit Reductions

As described in Section 2, the Company will give policyholders Benefit Reduction Offers to help mitigate the impact to policyholders of the premium rate increase. The impact of benefit reductions due to the proposed increases is 2.8%. This percentage is reflected in the projected future experience after the proposed rate increase in Exhibit 4 and Exhibit 5.

Anti-Selection

Policyholders in poor health tend to keep their current policies, while those in better health may be more likely to lapse. This results in anti-selection. The increase to morbidity due to anti-selection is 1.6%. This percentage is reflected in the projected future experience after the proposed rate increase in Exhibit 4 and Exhibit 5.

Non-forfeiture (NFO) Residual Liability

The residual NFO liability captures the future claims expected to be incurred on policies which elect the non-forfeiture benefit. The impact of the ultimate residual NFO liability due to the proposed increases is 0.8%. This percentage is reflected in the projected future experience after the proposed rate increase in Exhibit 4 and Exhibit 5.

As stated above, it is known that policyholders in poor health tend to keep their current policies, while those in better health may be more likely to lapse or elect the NFO benefit. The residual NFO liability is expected to grade up over time as this selection effect wears off. Given the grading, the initial residual NFO liability is 20% of the ultimate rate, grading up to the ultimate rate over 10 years.

11. ISSUE AGE RANGE

These products were available for issue ages 18 to 84. Premiums are based on issue age.

12. AREA FACTORS

The Company did not use area factors within the state in the premium scale for these products.

13. CLAIM LIABILITY AND RESERVE

Claim reserves were calculated using appropriate actuarial methods for IBNR and using continuance curves validated for the Company's experience for open claims on a disabled life basis. The claim reserves were discounted to the incurred date for each claim and have been included in the historical incurred claims.

14. ACTIVE LIFE RESERVES

Incurred claims are calculated without the impact of the change in active life reserves.

15. DISTRIBUTION OF BUSINESS

The historical experience reflects the actual distribution of policies during the experience period. The projected future experience is based on a seriatim projection of the current inforce policies. See Appendix C for the distribution of the inforce policies by key demographic and benefit characteristics.

16. NUMBER OF POLICYHOLDERS

Please refer to Appendix A for the current number of policyholders as of 12/31/2016 in this state.

17. AVERAGE ANNUAL PREMIUM

The average annual premium for these products both prior to the impact of the requested rate increase, and after, is indicated in Appendix A.

18. HISTORY OF RATE ADJUSTMENTS

Please refer to Appendix A for the history of rate adjustments on these products in this state.

19. EXPERIENCE – PAST AND FUTURE

Nationwide historical experience since inception by "incurred year," or "loss year," for these policy forms and riders as of 12/31/2016 is contained in Exhibit 2. Experience for loss years 2016 and prior are developed through 12/31/2016. In these exhibits, please note that the paid claims have been discounted with interest from the claim payment date back to the incurred date of the claim.

Historical and projected nationwide experience for all policies issued under these products is contained in Exhibit 3. This exhibit does not include the impact of the proposed rate increase. Projected experience utilizes best estimate assumptions.

The Nationwide historical and projected experience adjusted to reflect the State's specific rate increase history, both with and without the impact of the requested rate increase, is contained in Exhibit 4. Exhibit 4 demonstrates experience by calendar year under best estimate assumptions. Present values are summarized at the bottom of the exhibit under both best estimate assumptions and moderately adverse

assumptions. Moderately adverse assumptions are defined as best estimate assumptions as described in Section 10, plus a 10% load to future incurred claims.

In developing the projected future experience with the rate increase, an implementation date of 06/01/2018 was assumed.

20. RELATIONSHIP OF RENEWAL PREMIUM TO NEW BUSINESS PREMIUM

The Company is no longer selling any new Long-Term Care business. Therefore, the comparison of renewal premium rates after the rate increase to the Company's current new business premium rate schedule is not applicable.

21. SUMMARY OF APPENDICES

Appendix A contains information that is specific to the state in which this filing is made, such as the average annual premium, the number of policyholders inforce, etc. Similar information for nationwide is also contained in this Appendix.

Appendix B contains a summary of the benefits included under each policy form grouping.

Appendix C contains a summary of the demographic distributions of the inforce policies as of 12/31/2016.

Appendix D contains a detailed summary of the development of the projection assumptions.

Appendix E contains a comparison of the actual total termination rates to both the original pricing assumptions and current assumptions.

22. SUMMARY OF EXHIBITS

Exhibit 1 contains the breakdown of policy counts, annualized premium, and average premium for all inforce policies by state under each product grouping.

Exhibit 2 contains the historical nationwide lifetime experience for all policies issued under these products by calendar year and duration.

Exhibit 3 contains historical and projected nationwide experience for all policies issued under these products. This exhibit does not include the impact of the proposed rate increase. Projected experience utilizes best estimate assumptions.

Exhibit 4 contains historical and projected nationwide experience for all policies issued under these products. The exhibit also includes the projected lifetime loss ratios both with and without the impact of the proposed rate increase. Projected experience utilizes best estimate assumptions. The experience has been adjusted to reflect the State's specific rate history.

Exhibit 5 contains the historical and projected experience of only the policies issued in this state. This exhibit also includes the projected lifetime loss ratios both without and with the proposed increase.

23. ACTUARIAL CERTIFICATION

To the best of my knowledge and judgment this rate filing is in compliance with the applicable laws and regulations of this State as they relate to premium rate developments and revisions. This memorandum complies with all applicable Actuarial Standards of Practice, including ASOP No. 8.

I have reviewed and taken into consideration the policy design and coverage provided, and the Company's original underwriting and claims adjudication processes.

In my opinion, the rates are not excessive or unfairly discriminatory, and bear reasonable relationship to the benefits based on the loss ratio standards of this jurisdiction.

A handwritten signature in black ink, appearing to read "D. Keeler". The signature is written in a cursive, flowing style.

Deborah A. Keeler, ASA, MAAA
Senior Associate Actuary
Continental General Insurance Company
11001 Lakeline Blvd, Suite 120
Austin, Texas 78717

Appendix A
Continental General Insurance Company
1LTCGP0001, 1LTCGP0008

Pennsylvania

Requested Rate Increase = 210.8%

Issue Date Range (Section 1 in Actuarial Memorandum)

Pennsylvania	2/1/2001	to	6/1/2002
Nationwide	5/1/1999	to	6/1/2006

Rate Stabilization Date for Pennsylvania 9/16/2002

Number of Premium-Paying Policyholders and Annualized Premium as of December 31, 2016

Number of premium-paying lives in Pennsylvania	
Issued prior to Rate Stabilization	4
Issued on or after Rate Stabilization	0

	Policies	Premium
Pennsylvania	4 \$	6,557
Nationwide	546 \$	498,398

Average Annual Premium (Section 17 in Actuarial Memorandum)

The average annual premium for this form and associated riders,
prior to the rate increase, is:

Pennsylvania	1,914
Nationwide	1,100

The average annual premium for this form and associated riders in Pennsylvania,
including the impact of the requested rate increase, is: 5,949

Rate Increase History (Section 18 in Actuarial Memorandum)

Rate change of 20% was approved in 2014 and Rate change of 20% was approved in 2016

Lifetime Loss Ratio - Exhibit 4

The Lifetime Loss Ratio without the requested rate increase is:	124.1%
The Lifetime Loss Ratio with the requested rate increase is:	75.2%

Appendix B

Continental General Insurance Company

Description of Benefits

A brief summary of the benefits contained in the base forms and associated riders is provided below. A complete description of the benefit provisions and conditions for eligibility is contained in the policy forms and riders on file with the state.

Policy Forms 1LTCGP0001-PA and 1LTCGP0008-PA

Two policies were sold: a nursing home only policy (form 1LTCGP0008) and a comprehensive nursing home plus home care policy (form 1LTCGP0001). Except for the services covered, the pricing assumptions used, policy features, and benefit options are identical.

The elimination period could be chosen as 0, 20, 60, 90 or 180 service days. The benefit period is administered on a pool of money basis, where the pool of money is calculated either as the nursing home daily maximum times 365 times 2, 3, 4, 5, 6, 8, or unlimited, OR (at the option of the group) the pool of money could be chosen as a flat \$50,000, \$75,000, \$100,000, \$150,000, \$250,000, or unlimited. If the former approach was chosen, the nursing home daily maximum was available in multiples of \$10 (minimum of \$50). If the latter approach was chosen, the nursing home daily maximum could be \$75, \$100, \$125, \$150, \$175, or \$200. In either case on form 1LTCGP0001, home health care coverage could be added with a daily maximum of 50%, 75% or 100% of the nursing home daily maximum.

Benefits are payable when the insured becomes disabled in two out of six Activities of Daily Living (ADLs) for 90 days, or when he or she becomes cognitively impaired.

An insured who qualifies for benefits is eligible to receive all long term care services that are included in the Plan of Care and covered under the policy. For form 1LTCGP0008, this could include nursing home care or assisted living facility care. A 14-day per year bed reservation benefit could be included in the Plan of Care under the base policy. For form 1LTCGP0001, the Plan of Care could include any of the benefits covered by the nursing home only policy, and/or it could include home health care, adult day care, up to 21 days per year of respite care, or up to 5 times the daily maximum in caregiver training (one time only). Other alternate services could be included, if agreed to by all parties and if the home health option were added. If the Company's Personal Care Advisor were used, the Plan could also include coverage of supportive and medical equipment, to a lifetime maximum of 30 times the nursing home daily maximum.

All benefits are subject to the daily maximums, the total benefit allowance (i.e., the pool of money), and the elimination period (except that the latter does not apply to the respite benefit, the care coordination services, or the caregiver training benefit).

Premiums are waived after the policyholder has been receiving covered nursing home or ALF benefits for 90 days and as long as the person continues to receive covered nursing home or ALF benefits.

Several optional benefits were available for these policies. Most of these options were available at the group policyholder level.

- Compound Inflation Protection: Increases the daily maximum and the remaining lifetime maximum by 5%, compounded annually, on each policy anniversary.

Appendix B
Continental General Insurance Company
Description of Benefits

- Simple Inflation Protection: Increases the daily maximum and the remaining lifetime maximum by 5% of the original amounts, on each policy anniversary.
- Guaranteed Purchase: Gives the insured the option of increasing benefits at scheduled intervals, based on the CPI. The incremental benefits will be subject to an additional premium, based on the insured's attained age.
- Non-forfeiture Benefit: After 3 years inforce, the cumulative premiums paid will be available upon lapse to continue coverage for a revised lifetime maximum (i.e., a shortened benefit period). The revised lifetime maximum will be calculated as the cumulative premiums, subject to a minimum of 30 times the daily maximum.
- Survivorship Benefit: Waives the premium to a surviving spouse after the death of the other spouse, as long as both spouses have had coverage inforce for at least 10 years.
- 3 of 6 ADLs: Changes the benefit eligibility requirement from being disabled in 2 of 6 ADLs to being disabled in 3 of 6 ADLs.
- WOP on Home Health (Form 1LTCGP0001 only): Expands the waiver of premium benefit to also apply once a person has been receiving covered home health care benefits for 90 days.
- Restoration Benefit: Adds a benefit which restores the lifetime maximum to its original level, after the insured has recovered and returned to normal activities for 180 days.
- Calendar Period Definition on Elimination Period: Changes the definition of elimination period to be based on calendar days elapsed, rather than the number of days on which services are received.
- Death Benefit: Returns a specified percentage of the cumulative premiums paid to the insured's estate if death occurs before age 75. The percentage of premiums returned is 100% for deaths occurring through age 65; the percentage then grades down by 10% per year, to 0% for ages 75+.

Appendix C Continental General Insurance Company Demographics Distribution of Inforce Business as of December 31st, 2016 All Non-NFO Policies - NATIONWIDE				
	Forms 1LTCGP0001 and 1LTCGP0008			
Issue Year	Count	% of Count	Premium	% of Premium
1999	3	1%	3,572	1%
2000	133	24%	88,070	18%
2001	176	32%	158,364	32%
2002	115	21%	132,919	27%
2003	86	16%	86,732	17%
2004	17	3%	17,525	4%
2005	12	2%	8,912	2%
2006	4	1%	2,304	0%
2007	-	0%	-	0%
2008	-	0%	-	0%
2009	-	0%	-	0%
2010	-	0%	-	0%
Total	546	100%	498,398	100%

Appendix C Continental General Insurance Company Demographics Distribution of Inforce Business as of December 31st, 2016 All Non-NFO Policies - NATIONWIDE				
	Forms 1LTCGP0001 and 1LTCGP0008			
Issue Age	Count	% of Count	Premium	% of Premium
<45	147	27%	61,891	12%
45 - 49	55	10%	46,249	9%
50 - 54	136	25%	118,733	24%
55 - 59	131	24%	145,151	29%
60 - 64	53	10%	81,901	16%
65 - 69	19	3%	28,794	6%
70 - 74	4	1%	9,785	2%
75 - 79	1	0%	5,893	1%
80+	-	0%	-	0%
Total	546	100%	498,398	100%

Appendix C Continental General Insurance Company Demographics Distribution of Inforce Business as of December 31st, 2016 All Non-NFO Policies - NATIONWIDE				
	Forms 1LTCGP0001 and 1LTCGP0008			
Attained Age	Count	% of Count	Premium	% of Premium
<45	25	5%	5,911	1%
45 - 49	26	5%	9,389	2%
50 - 54	39	7%	14,935	3%
55 - 59	58	11%	32,747	7%
60 - 64	63	12%	55,468	11%
65 - 69	152	28%	137,581	28%
70 - 74	114	21%	131,722	26%
75 - 79	48	9%	71,316	14%
80+	21	4%	39,329	8%
Total	546	100%	498,398	100%

Appendix C Continental General Insurance Company Demographics Distribution of Inforce Business as of December 31st, 2016 All Non-NFO Policies - NATIONWIDE				
	Forms 1LTCGP0001 and 1LTCGP0008			
Gender	Count	% of Count	Premium	% of Premium
F	338	62%	301,108	60%
M	208	38%	197,289	40%
Total	546	100%	498,398	100%

Appendix C Continental General Insurance Company Demographics Distribution of Inforce Business as of December 31st, 2016 All Non-NFO Policies - NATIONWIDE				
	Forms 1LTCGP0001 and 1LTCGP0008			
Inflation Options	Count	% of Count	Premium	% of Premium
NONE	131	24%	83,878	17%
GPO/COLI	19	3%	19,505	4%
5% Simple Lifetime	9	2%	14,019	3%
5% Compound - Double (14 years)	-	0%	-	0%
5% Compound - Triple (23 years)	-	0%	-	0%
5% Compound - Lifetime	387	71%	380,996	76%
Total	546	100%	498,398	100%

Appendix C Continental General Insurance Company Demographics Distribution of Inforce Business as of December 31st, 2016 All Non-NFO Policies - NATIONWIDE				
	Forms 1LTCGP0001 and 1LTCGP0008			
Limited Payment Options	Count	% of Count	Premium	% of Premium
Single	-	0%	-	0%
5 Pay	-	0%	-	0%
10 Pay	-	0%	-	0%
15 Pay	-	0%	-	
20 Pay	-	0%	-	0%
PU at 65	-	0%	-	0%
Lifetime	546	100%	498,398	100%
Total	546	100%	498,398	100%

Appendix C Continental General Insurance Company Demographics Distribution of Inforce Business as of December 31st, 2016 All Non-NFO Policies - NATIONWIDE				
	Forms 1LTCGP0001 and 1LTCGP0008			
Elimination Period Days	Count	% of Count	Premium	% of Premium
0	-	0%	-	0%
20	6	1%	11,166	2%
30	-	0%	-	0%
60	-	0%	-	0%
90	540	99%	487,232	98%
100	-	0%	-	0%
180	-	0%	-	0%
365	-	0%	-	0%
Total	546	100%	498,398	100%

Appendix C Continental General Insurance Company Demographics Distribution of Inforce Business as of December 31st, 2016 All Non-NFO Policies - NATIONWIDE				
	Forms 1LTCGP0001 and 1LTCGP0008			
Benefit Period	Count	% of Count	Premium	% of Premium
1 - 1.5 years	-	0%	-	0%
2 - 2.5 years	1	0%	882	0%
3 - 3.5 years	92	17%	81,738	16%
4 - 4.5 years	5	1%	5,186	1%
5 years	300	55%	227,809	46%
6 years	-	0%	-	0%
7 years	-	0%	-	0%
8 years	-	0%	-	0%
Lifetime	148	27%	182,783	37%
Total	546	100%	498,398	100%

Appendix C Continental General Insurance Company Demographics Distribution of Inforce Business as of December 31st, 2016 All Non-NFO Policies - NATIONWIDE				
	Forms 1LTCGP0001 and 1LTCGP0008			
Marital Status	Count	% of Count	Premium	% of Premium
Married	338	62%	323,169	65%
Single	208	38%	175,228	35%
Total	546	100%	498,398	100%

Appendix C Continental General Insurance Company Demographics Distribution of Inforce Business as of December 31st, 2016 All Non-NFO Policies - NATIONWIDE				
	Forms 1LTCGP0001 and 1LTCGP0008			
HHC Percent	Count	% of Count	Premium	% of Premium
0%	-	0%	-	0%
50%	77	14%	48,430	10%
75%	66	12%	67,371	14%
80%	-	0%	-	0%
100%	403	74%	382,596	77%
125%	-	0%	-	0%
150%	-	0%	-	0%
Total	546	100%	498,398	100%

Appendix C Continental General Insurance Company Demographics Distribution of Inforce Business as of December 31st, 2016 All Non-NFO Policies - NATIONWIDE				
	Forms 1LTCGP0001 and 1LTCGP0008			
Tax Status	Count	% of Count	Premium	% of Premium
TQ	546	100%	498,398	100%

Continental General Insurance Company
Appendix D
Actuarial Assumption Development

Appendix D contains a description of the experience studies conducted on the Company's actual experience.

Termination Study

A study was conducted on the Company's actual termination experience from 2006 to 6/30/2016 on forms issued by Continental General Insurance Company. The study measured total termination rates.

The mortality assumption, including selection factors and mortality improvement, is based on industry expectations. Assumed mortality is equal to 100% of the Annuity 2000 Basic Table with mortality steepening factors applied, historical mortality improvement, and selection factors.

The future expected voluntary lapse assumptions were developed based on the historical implied lapse experience and judgment. Historical implied lapses were determined by subtracting expected deaths, using the mortality assumptions discussed above, and actual benefit exhaustions from total terminations. The expected voluntary lapse rates vary by inflation option, spousal discount, gender, and policy duration.

Exhibit D-1 contains the comparison of implied lapse experience to the current lapse assumptions. The Exhibit shows total lives, actual total terminations and expected deaths. The voluntary lapse rates are shown as described above, as historical implied lapses and expected lapses.

Morbidity Study

A morbidity study was also conducted on the Company's actual experience from 2006 to 6/30/2016 on forms issued by Continental General Insurance Company. Actual claims were measured against the Milliman 2014 *Long Term Care Guidelines (Guidelines)*. Actual-to-expected fitting factors were developed based on the actual experience and judgment.

Actual incurred claims are based on paid claims and remaining claim reserves discounted (using an interest rate of 4.5% for this experience study) back to the claim incurred date. The claim reserves were discounted from valuation date to the claim incurred date using a 4.5% discount rate and excluding any waiver of premium load, LAE load and explicit margin. Actual claims include approximately \$14 million of IBNR as of June 30, 2016, which is allocated to incurred year as follows: approximately 64% to incurred year 2016, 23% to incurred year 2015, and 13% to incurred year 2014. Actual incurred claims are calculated by adding together the present value of paid claims and claim reserves. Actual average claim severity was calculated by dividing actual incurred claims by the count of claims. In this study, waiver of premium was excluded from both the actual claims and expected claims.

Expected claims were based on the *Guidelines* and include selection factors and actual-to-expected fitting factors. The actual-to-expected fitting factors varied by coverage type, benefit period, payment type, marital status, and form. No future morbidity improvement is assumed.

Exhibit D-2 contains the comparison of actual claim experience to the current assumptions.

Continental General Insurance Company

Appendix D

Exhibit D-1

Termination Study

Experience by Policy Duration

Policy Duration	Total Lives	Total Terminations		Mortality Rate		Voluntary Lapse Rate	
		Count	Rate	Expected		Implied	"Current"
1	17,299	1,862	10.8%	0.1%		10.6%	10.6%
2	19,266	1,080	5.6%	0.3%		5.3%	5.3%
3	19,532	841	4.3%	0.3%		4.0%	4.0%
4	19,983	758	3.8%	0.4%		3.4%	3.2%
5	20,678	597	2.9%	0.5%		2.4%	2.6%
6	21,460	565	2.6%	0.6%		2.0%	2.0%
7	20,779	467	2.2%	0.6%		1.6%	1.6%
8	18,031	361	2.0%	0.7%		1.3%	1.2%
9	13,291	290	2.2%	0.8%		1.2%	1.1%
10+	29,184	692	2.4%	1.3%		1.0%	0.7%
Total	199,503	7,513	3.8%	0.6%		3.1%	3.1%

Notes:

- 1) Experience from 2006 through 6/30/2016.
- 2) Expected Mortality Rate is 100% of the Annuity 2000 Basic Table with mortality steepening factors applied, historical mortality improvement, and selection factors.
- 3) Implied Voluntary Lapse Rate is the Total Termination Rate minus the Expected Mortality Rate minus the Actual Benefit Exhaust Rate.
- 4) Current Voluntary Lapse Rate is the current projection assumption.
 Since these vary by inflation benefit option, spousal discount, and gender the rates shown above are composites.
 The ultimate lapse rate starts in duration 15.
- 5) Includes only lifetime pay policies (excludes single pay, 5 pay, 10 pay, 15 pay, 20 pay, and paid-up at 65).

Continental General Insurance Company

Appendix D

Exhibit D-2

Policy Forms: 1LTCGP0001, 1LTCGP0008, 1LTCIP0001, 1LTCIP0002, 2LTCIP0001, 2LTCIP0002, 4LTCIP0001

Claim Study

Experience by Policy Duration

Policy Duration	Total Lives	Actual Claim Count	Actual Incurred Claims	Expected Incurred Claims	Actual to Expected
1	21,621	10	835,351	627,490	133%
2	22,556	30	1,345,414	1,343,215	100%
3	21,994	25	1,877,880	1,862,023	101%
4	22,443	25	1,176,810	2,625,146	45%
5	22,937	48	3,778,592	3,618,262	104%
6	23,351	69	6,112,905	4,798,452	127%
7	22,867	63	4,892,545	5,967,960	82%
8	20,532	107	7,399,954	6,582,766	112%
9	16,664	85	6,351,693	6,514,700	97%
10	12,174	68	6,022,516	5,955,987	101%
11	8,872	76	4,777,599	5,095,015	94%
12	5,792	59	4,082,155	4,102,071	100%
13	4,351	44	3,327,233	3,785,410	88%
14	3,172	55	3,337,044	3,335,820	100%
15+	2,661	60	4,644,403	3,431,704	135%
Total	231,985	826	59,962,096	59,646,020	101%

Experience by Year

Calendar Year	Total Lives	Actual Claim Count	Actual Incurred Claims	Expected Incurred Claims	Actual to Expected
2006	13,602	22	1,197,783	1,500,139	80%
2007	18,090	39	2,043,861	2,109,674	97%
2008	23,318	40	2,126,034	2,881,919	74%
2009	26,258	49	3,675,159	3,732,835	98%
2010	26,641	58	5,335,488	4,602,689	116%
2011	23,931	84	6,113,680	5,526,008	111%
2012	23,217	100	7,039,944	6,591,396	107%
2013	22,628	105	7,256,546	7,694,465	94%
2014	22,088	111	8,752,415	9,046,706	97%
2015	21,610	144	10,842,957	10,285,425	105%
2016	10,603	74	5,578,229	5,674,764	98%
Total	231,985	826	59,962,096	59,646,020	101%

Notes:

- 1) Experience from 2006 through 6/30/2016.
- 2) Actual incurred claims are defined as the sum of paid claims and reserves.
Paid claims represent the present value of paid claims discounted to the claim incurred date.
Reserve amounts represent the present value of the remaining claim reserve (including IBNR) discounted to the claim incurred date.
- 3) Expected incurred claims are based on the Milliman 2014 *Long-Term Care Guidelines* (including Product Factors).
- 4) Claim dollar amounts are discounted using a 4.50% interest rate (both actual and expected).

Continental General Insurance Company
Appendix E
Policy Persistency Comparison
Policy Forms: 1LTCGP0001, 1LTCGP0008

Policy Duration	<u>Actual Experience</u>		<u>Original Pricing Assumptions</u>			<u>Current Assumptions</u>		
	Total Lives	Total Terminations	Lapse	Mortality	Total Terminations	Lapse	Mortality	Total Terminations
1	10	10.0%	8.4%	0.1%	8.5%	17.2%	0.0%	17.2%
2	26	7.7%	6.8%	0.2%	7.0%	6.3%	0.1%	6.4%
3	51	7.8%	4.7%	0.4%	5.1%	4.2%	0.1%	4.3%
4	161	7.5%	3.4%	0.6%	4.0%	3.3%	0.2%	3.5%
5	290	3.1%	3.5%	0.8%	4.3%	2.6%	0.3%	2.9%
6	489	2.2%	3.5%	1.0%	4.4%	2.1%	0.3%	2.4%
7	651	1.1%	3.4%	1.0%	4.4%	1.7%	0.3%	2.0%
8	647	2.6%	3.4%	1.1%	4.5%	1.4%	0.3%	1.7%
9	630	1.1%	3.4%	1.3%	4.7%	1.2%	0.4%	1.6%
10	623	2.7%	3.4%	1.5%	4.9%	1.0%	0.4%	1.4%
11	595	1.8%	3.4%	1.7%	5.1%	0.9%	0.4%	1.3%
12	577	1.0%	3.4%	1.9%	5.2%	0.8%	0.5%	1.3%
13	526	1.5%	3.4%	2.0%	5.4%	0.7%	0.5%	1.2%
14	412	1.5%	3.4%	2.1%	5.5%	0.6%	0.6%	1.2%
15	232	0.4%	3.3%	2.0%	5.3%	0.5%	0.6%	1.1%
16	7	14.3%	3.9%	3.8%	7.5%	0.4%	1.4%	1.9%
17	3	0.0%	3.7%	4.7%	8.2%	0.3%	1.9%	2.2%

Notes:

- 1) Experience is 2006 through 6/30/16.
- 2) The "Original Pricing Assumptions" are those assumptions originally used to price this form.
- 3) The "Current Assumptions" are those used in the projection for the current rate filing.
 Since Lapse Rates vary by inflation benefit option, spousal discount, and gender, the rates shown above are composites.
 The ultimate lapse rate starts in duration 15.
 The mortality assumptions are 100% of the Annuity 2000 Basic Table with mortality steepening factors applied,
 historical mortality improvement, and selection factors.
- 4) The results shown above include only lifetime pay policies
 (excludes single pay, 5 pay, 10 pay, 15 pay, 20 pay, and paid-up at 65).

Exhibit 1
Continental General Insurance Company
Summary of Non-Paid Up Lives
Nationwide
Policy Forms: 1LTCGP0001, 1LTCGP0008
As of 12/31/2016

Issue State	Lives	Annualized Premium	Average Premium
AK	-	\$ -	\$ -
AL	8	\$ 14,794	\$ 1,849
AR	1	\$ 882	\$ 882
AZ	15	\$ 25,804	\$ 1,720
CA	2	\$ 2,600	\$ 1,300
CO	-	\$ -	\$ -
CT	-	\$ -	\$ -
DC	-	\$ -	\$ -
DE	-	\$ -	\$ -
GA	-	\$ -	\$ -
HI	-	\$ -	\$ -
IA	16	\$ 17,806	\$ 1,113
ID	1	\$ 1,304	\$ 1,304
IL	17	\$ 19,494	\$ 1,147
IN	5	\$ 5,004	\$ 1,001
KS	-	\$ -	\$ -
KY	25	\$ 18,386	\$ 735
LA	16	\$ 21,040	\$ 1,315
MA	-	\$ -	\$ -
MD	1	\$ 2,503	\$ 2,503
ME	15	\$ 23,450	\$ 1,563
MI	3	\$ 4,222	\$ 1,407
MN	21	\$ 18,055	\$ 860
MO	1	\$ 1,320	\$ 1,320
MS	-	\$ -	\$ -
MT	-	\$ -	\$ -
NC	6	\$ 6,250	\$ 1,042
ND	-	\$ -	\$ -
NE	3	\$ 4,080	\$ 1,360
NH	-	\$ -	\$ -
NJ	2	\$ 1,515	\$ 758
NM	-	\$ -	\$ -
NV	9	\$ 7,316	\$ 813
OH	81	\$ 75,802	\$ 936
OK	2	\$ 2,662	\$ 1,331
OR	40	\$ 49,892	\$ 1,247
PA	4	\$ 6,557	\$ 1,639
RI	-	\$ -	\$ -
SC	74	\$ 39,405	\$ 532
SD	-	\$ -	\$ -
TN	36	\$ 43,312	\$ 1,203
TX	3	\$ 1,257	\$ 419
UT	1	\$ 663	\$ 663
VA	13	\$ 10,881	\$ 837
VT	-	\$ -	\$ -
WA	-	\$ -	\$ -
WI	125	\$ 72,142	\$ 577
WV	-	\$ -	\$ -
WY	-	\$ -	\$ -
Total	546	\$ 498,398	\$ 913

Exhibit 2
Continental General Insurance Company
Policy Form: 1LTCGP0001, 1LTCGP0008
Nationwide

Historical Experience by Year
As of 12/31/2016

Year	Premium	Incurred Claims	Loss Ratio
1999	3,771	0	0.0%
2000	30,358	0	0.0%
2001	340,927	0	0.0%
2002	546,317	195,783	35.8%
2003	654,342	24,580	3.8%
2004	571,679	8,716	1.5%
2005	556,375	306,042	55.0%
2006	529,791	0	0.0%
2007	528,666	0	0.0%
2008	515,514	55,021	10.7%
2009	519,705	22,104	4.3%
2010	495,098	(0)	0.0%
2011	482,233	(0)	0.0%
2012	477,973	166,388	34.8%
2013	472,786	67,610	14.3%
2014	469,879	158,315	33.7%
2015	488,322	14,156	2.9%
2016	491,819	46,109	9.4%
Total	8,175,557	1,064,825	13.0%

Historical Experience by Duration

Year	Premium	Incurred Claims	Loss Ratio
1	792,317	31,262	3.9%
2	725,474	189,102	26.1%
3	649,433	8,716	1.3%
4	577,696	306,201	53.0%
5	540,145	(160)	0.0%
6	523,999	0	0.0%
7	501,104	0	0.0%
8	502,898	77,125	15.3%
9	506,956	4,363	0.9%
10	489,654	221	0.0%
11	481,737	147,865	30.7%
12	472,246	239,007	50.6%
13	463,666	10,965	2.4%
14	419,945	13,664	3.3%
15	325,296	17,915	5.5%
16	182,004	15,216	8.4%
17	18,711	3,156	16.9%
18	2,279	206	9.0%
19	0	0	0.0%
Total	8,175,557	1,064,825	13.0%

Present Values at 4.5%

Premium	Incurred Claims	Loss Ratio
11,952,331	1,569,434	13.1%

Exhibit 3
Continental General Insurance Company
Policy Form: 1LTCGP0001, 1LTCGP0008
Nationwide
Historical and Projected Future Experience

Historical as of 12/31/2016

Calendar Year	Earned Premium	Original-Level Premium	Incurred Claims	Loss Ratio
1999	3,771	3,771	0	0.0%
2000	30,358	30,358	0	0.0%
2001	340,927	340,927	0	0.0%
2002	546,317	546,317	195,783	35.8%
2003	654,342	654,342	24,580	3.8%
2004	571,679	571,679	8,716	1.5%
2005	556,375	556,375	306,042	55.0%
2006	529,791	529,791	0	0.0%
2007	528,666	528,666	0	0.0%
2008	515,514	515,514	55,021	10.7%
2009	519,705	519,705	22,104	4.3%
2010	495,098	495,098	0	0.0%
2011	482,233	482,233	0	0.0%
2012	477,973	477,973	166,388	34.8%
2013	472,786	472,786	67,610	14.3%
2014	469,879	468,024	158,315	33.7%
2015	488,322	458,734	14,156	2.9%
2016	491,819	450,739	46,109	9.4%

Projection without Rate Increase

Calendar Year	Earned Premium	Original-Level Premium	Incurred Claims	Loss Ratio
2017	509,313	439,688	251,846	49.4%
2018	534,755	421,248	286,164	53.5%
2019	540,703	406,907	327,771	60.6%
2020	532,463	397,033	379,228	71.2%
2021	518,250	385,973	439,189	84.7%
2022	503,526	375,007	507,250	100.7%
2023	487,395	362,993	585,312	120.1%
2024	470,335	350,287	669,286	142.3%
2025	452,463	336,977	761,660	168.3%
2026	433,902	323,154	863,668	199.0%
2027	414,751	308,891	978,223	235.9%
2028	395,072	294,234	1,103,366	279.3%
2029	374,922	279,228	1,226,331	327.1%
2030	354,376	263,925	1,346,106	379.9%
2031	333,518	248,391	1,456,194	436.6%
2032	312,445	232,697	1,561,926	499.9%
2033	291,287	216,939	1,663,549	571.1%
2034	270,174	201,215	1,750,484	647.9%
2035	249,269	185,646	1,828,122	733.4%
2036	228,734	170,352	1,879,509	821.7%
2037	208,721	155,447	1,915,453	917.7%
2038	189,384	141,046	1,930,020	1019.1%
2039	170,881	127,265	1,930,478	1129.7%
2040	153,351	114,210	1,920,632	1252.4%
2041	136,892	101,952	1,895,977	1385.0%
2042	121,571	90,542	1,857,456	1527.9%
2043	107,432	80,011	1,814,555	1689.0%
2044	94,508	70,386	1,772,366	1875.4%
2045	82,804	61,670	1,733,554	2093.6%
2046	72,288	53,837	1,688,974	2336.4%
2047+	435,028	323,992	22,876,588	5258.6%

Loss Ratio Summaries at 12/31/2016 (Discounted at 4.5%)

Accumulated Value of Historical	11,952,331	11,876,658	1,569,434	13.1%
Present Value of Future	6,339,054	4,805,835	21,900,680	345.5%
Total Values	18,291,384	16,682,493	23,470,114	128.3%

Exhibit 4
Continental General Insurance Company
Policy Form: 1LTCGP0001, 1LTCGP0008
Nationwide Experience Adjusted to Reflect Pennsylvania Rate Increase History, Before and After Proposed Rate Increase

Historical as of 12/31/2016				
Calendar Year	Earned Premium	Original-Level Premium	Incurred Claims	Loss Ratio
1999	3,771	3,771	0	0.0%
2000	30,358	30,358	0	0.0%
2001	340,927	340,927	0	0.0%
2002	546,317	546,317	195,783	35.8%
2003	654,342	654,342	24,580	3.8%
2004	571,679	571,679	8,716	1.5%
2005	556,375	556,375	306,042	55.0%
2006	529,791	529,791	0	0.0%
2007	528,666	528,666	0	0.0%
2008	515,514	515,514	55,021	10.7%
2009	519,705	519,705	22,104	4.3%
2010	495,098	495,098	(0)	0.0%
2011	482,233	482,233	(0)	0.0%
2012	477,973	477,973	166,388	34.8%
2013	472,786	472,786	67,610	14.3%
2014	470,053	468,024	158,315	33.7%
2015	521,722	458,734	14,156	2.7%
2016	544,551	450,739	46,109	8.5%

Projection without Rate Increase				
Calendar Year	Earned Premium	Original-Level Premium	Incurred Claims*	Loss Ratio
2017	604,279	439,688	253,305	41.9%
2018	606,597	421,248	287,395	47.4%
2019	585,946	406,907	328,632	56.1%
2020	571,727	397,033	380,058	66.5%
2021	555,801	385,973	440,075	79.2%
2022	540,009	375,007	508,210	94.1%
2023	522,710	362,993	586,351	112.2%
2024	504,413	350,287	670,397	132.9%
2025	485,246	336,977	762,842	157.2%
2026	465,341	323,154	864,923	185.9%
2027	444,803	308,891	979,558	220.2%
2028	423,697	294,234	1,104,780	260.7%
2029	402,088	279,228	1,227,804	305.4%
2030	380,052	263,925	1,347,619	354.6%
2031	357,683	248,391	1,457,725	407.5%
2032	335,084	232,697	1,563,462	466.6%
2033	312,392	216,939	1,665,077	533.0%
2034	289,750	201,215	1,751,987	604.7%
2035	267,330	185,646	1,829,588	684.4%
2036	245,307	170,352	1,880,915	766.8%
2037	223,844	155,447	1,916,787	856.3%
2038	203,106	141,046	1,931,268	950.9%
2039	183,262	127,265	1,931,633	1054.0%
2040	164,462	114,210	1,921,693	1168.5%
2041	146,811	101,952	1,896,943	1292.1%
2042	130,380	90,542	1,858,324	1425.3%
2043	115,216	80,011	1,815,331	1575.6%
2044	101,356	70,386	1,773,057	1749.3%
2045	88,804	61,670	1,734,166	1952.8%
2046	77,526	53,837	1,689,512	2179.3%
2047+	466,582	324,016	22,879,876	4903.7%

Projection with 210.8% Rate Increase				
Calendar Year	Earned Premium	Original-Level Premium	Incurred Claims*	Loss Ratio
2017	604,279	439,688	253,305	41.9%
2018	784,777	400,064	284,419	36.2%
2019	1,501,646	356,243	313,526	20.9%
2020	1,548,818	346,110	359,897	23.2%
2021	1,505,674	336,468	415,340	27.6%
2022	1,462,895	326,909	478,187	32.7%
2023	1,416,031	316,436	550,163	38.9%
2024	1,366,465	305,360	627,296	45.9%
2025	1,314,541	293,757	711,989	54.2%
2026	1,260,617	281,706	805,414	63.9%
2027	1,204,978	269,273	910,345	75.5%
2028	1,147,804	256,496	1,024,857	89.3%
2029	1,089,263	243,414	1,136,839	104.4%
2030	1,029,569	230,075	1,244,922	120.9%
2031	968,971	216,533	1,343,707	138.7%
2032	907,747	202,852	1,438,270	158.4%
2033	846,276	189,115	1,528,804	180.7%
2034	784,937	175,407	1,605,705	204.6%
2035	724,203	161,835	1,673,987	231.1%
2036	664,540	148,503	1,718,175	258.6%
2037	606,397	135,510	1,748,217	288.3%
2038	550,218	122,956	1,758,762	319.6%
2039	496,460	110,942	1,756,551	353.8%
2040	445,531	99,561	1,745,089	391.7%
2041	397,713	88,876	1,720,349	432.6%
2042	353,202	78,929	1,683,199	476.6%
2043	312,122	69,749	1,642,267	526.2%
2044	274,574	61,358	1,602,152	583.5%
2045	240,572	53,760	1,565,265	650.6%
2046	210,019	46,932	1,523,368	725.3%
2047+	1,263,980	282,458	20,519,488	1623.4%

Best Estimate Loss Ratio Summaries at 12/31/2016 (Discounted at 4.5%)

Accumulated Value of Historical	12,042,110	11,876,658	1,569,434	13.0%	12,042,110	11,876,658	1,569,434	13.0%
Present Value of Future	6,892,159	4,805,835	21,920,992	318.1%	16,780,320	4,276,724	20,099,320	119.8%
Total Values	18,934,269	16,682,493	23,490,426	124.1%	28,822,431	16,153,382	21,668,754	75.2%

Moderately Adverse Loss Ratio Summaries at 12/31/2016 (Discounted at 4.5%) **

Accumulated Value of Historical	12,042,110	11,876,658	1,569,434	13.0%	12,042,110	11,876,658	1,569,434	13.0%
Present Value of Future	6,892,159	4,805,835	24,113,092	349.9%	16,780,320	4,276,724	22,109,252	131.8%
Total Values	18,934,269	16,682,493	25,682,526	135.6%	28,822,431	16,153,382	23,678,686	82.2%

LLR/85 Demonstration

1 Accumulated value of initial earned premium	\$	11,876,658	x	66.5%	=	\$	7,897,978
2a Accumulated value of earned premium	\$	12,042,110					
2b Accumulated value of prior premium rate schedule increases	\$	165,452	x	85%	=	\$	140,634
3 Present value of future projected initial earned premium	\$	4,276,724	x	66.5%	=	\$	2,844,021
4a Present value of future projected premium	\$	16,780,320					
4b Present value of future projected premium in excess of the projected initial earned premiums	\$	12,503,597	x	85%	=	\$	10,628,057
5 Lifetime Earned Premium times Prescribed Factor							\$ 21,510,690
6 Moderately Adverse Lifetime Incurred Claims **							\$ 23,678,686

* Calendar Year projected incurred claims represent best estimate incurred claims.

** Moderately adverse incurred claims are defined as best estimate incurred claims , plus a 10% load to incurred claims.

Exhibit 5
Continental General Insurance Company
Policy Form: 1LTCGP0001, 1LTCGP0008
Pennsylvania Experience, Before and After Proposed Rate Increase

Historical as of 12/31/2016				
Calendar Year	Earned Premium	Original-Level Premium	Incurred Claims	Loss Ratio
1999	0	0	0	0.0%
2000	0	0	0	0.0%
2001	3,098	3,098	0	0.0%
2002	6,313	6,313	161	2.6%
2003	6,827	6,827	0	0.0%
2004	5,301	5,301	0	0.0%
2005	5,352	5,352	0	0.0%
2006	5,357	5,357	0	0.0%
2007	5,352	5,352	0	0.0%
2008	5,359	5,359	0	0.0%
2009	5,357	5,357	0	0.0%
2010	5,357	5,357	0	0.0%
2011	4,640	4,640	0	0.0%
2012	6,022	6,022	0	0.0%
2013	5,312	5,312	0	0.0%
2014	5,314	5,314	0	0.0%
2015	5,878	5,323	170	2.9%
2016	6,044	5,332	547	9.0%

Projection without Rate Increase					Projection with 210.8% Rate Increase				
Calendar Year	Earned Premium	Original-Level Premium	Incurred Claims*	Loss Ratio	Calendar Year	Earned Premium	Original-Level Premium	Incurred Claims*	Loss Ratio
2017	6,436	5,266	3,725	57.9%	2017	6,436	5,266	3,725	57.9%
2018	6,620	5,048	4,401	66.5%	2018	8,565	4,794	4,346	50.7%
2019	6,831	4,801	5,092	74.5%	2019	17,508	4,203	4,826	27.6%
2020	6,690	4,646	5,995	89.6%	2020	18,126	4,050	5,647	31.2%
2021	6,443	4,474	7,039	109.3%	2021	17,457	3,901	6,615	37.9%
2022	6,175	4,288	8,237	133.4%	2022	16,729	3,738	7,723	46.2%
2023	5,886	4,087	9,594	163.0%	2023	15,947	3,563	8,976	56.3%
2024	5,577	3,873	10,825	194.1%	2024	15,110	3,376	10,108	66.9%
2025	5,250	3,646	12,015	228.9%	2025	14,224	3,178	11,198	78.7%
2026	4,908	3,408	13,732	279.8%	2026	13,297	2,971	12,777	96.1%
2027	4,555	3,163	15,711	344.9%	2027	12,342	2,758	14,596	118.3%
2028	4,193	2,912	17,800	424.5%	2028	11,361	2,538	16,514	145.4%
2029	3,825	2,657	18,320	478.9%	2029	10,364	2,316	16,965	163.7%
2030	3,457	2,401	18,132	524.5%	2030	9,366	2,093	16,752	178.9%
2031	3,093	2,148	17,797	575.5%	2031	8,379	1,872	16,405	195.8%
2032	2,737	1,900	18,170	663.9%	2032	7,415	1,657	16,710	225.4%
2033	2,392	1,661	18,705	781.9%	2033	6,481	1,448	17,164	264.8%
2034	2,062	1,432	18,806	912.1%	2034	5,586	1,248	17,216	308.2%
2035	1,752	1,216	17,535	1001.1%	2035	4,746	1,060	16,024	337.7%
2036	1,466	1,018	15,811	1078.3%	2036	3,973	888	14,428	363.2%
2037	1,209	840	14,059	1162.6%	2037	3,277	732	12,811	391.0%
2038	981	681	12,679	1292.2%	2038	2,658	594	11,536	433.9%
2039	782	543	11,391	1456.8%	2039	2,119	473	10,349	488.5%
2040	612	425	9,707	1586.6%	2040	1,658	370	8,809	531.4%
2041	470	326	8,002	1702.9%	2041	1,273	284	7,254	569.7%
2042	354	246	6,481	1831.2%	2042	959	214	5,868	612.0%
2043	261	181	5,166	1978.0%	2043	708	158	4,673	660.4%
2044	188	131	4,034	2142.3%	2044	510	114	3,645	714.5%
2045	132	92	3,064	2313.6%	2045	359	80	2,766	770.9%
2046	91	63	2,280	2510.3%	2046	246	55	2,056	835.8%
2047+	162	112	4,937	3052.9%	2047+	438	98	4,445	1014.7%

Best Estimate Loss Ratio Summaries at 12/31/2016 (Discounted at 4.5%)

Accumulated Value of Historical	125,366	124,045	1,047	0.8%	125,366	124,045	1,047	0.8%
Present Value of Future	67,683	48,254	182,650	269.9%	162,948	43,110	169,266	103.9%
Total Values	193,049	172,299	183,697	95.2%	288,314	167,155	170,313	59.1%

Moderately Adverse Loss Ratio Summaries at 12/31/2016 (Discounted at 4.5%) **

Accumulated Value of Historical	125,366	124,045	1,047	0.8%	125,366	124,045	1,047	0.8%
Present Value of Future	67,683	48,254	200,915	296.8%	162,948	43,110	186,193	114.3%
Total Values	193,049	172,299	201,962	104.6%	288,314	167,155	187,239	64.9%

***LLR/85 Demonstration**

1 Accumulated value of initial earned premium	\$	124,045	x 66.5%	=	\$	82,490
2a Accumulated value of earned premium	\$	125,366				
2b Accumulated value of prior premium rate schedule increases	\$	1,321	x 85%	=	\$	1,123
3 Present value of future projected initial earned premium	\$	43,110	x 66.5%	=	\$	28,668
4a Present value of future projected premium	\$	162,948				
4b Present value of future projected premium in excess of the projected initial earned premiums	\$	119,838	x 85%	=	\$	101,862
5 Lifetime Earned Premium times Prescribed Factor					\$	214,143
6 Moderately Adverse Lifetime Incurred Claims **					\$	187,239

* Calendar Year projected incurred claims represent best estimate incurred claims.

** Moderately adverse incurred claims are defined as best estimate incurred claims , plus a 10% load to incurred claims.

November 20, 2017

Pennsylvania Insurance Department
Commonwealth of Pennsylvania
1326 Strawberry Square, 13th Floor
Harrisburg, Pennsylvania 17120

RE: Continental General Insurance Company
NAIC No: 71404
Rate Revision Filing on Group Long-Term Care Insurance
Policy Forms: 1LTCGP0001-PA, 1LTCGP0008-PA

Dear Sir or Madam:

Enclosed for your review, please find copies of an Actuarial Memorandum and rate sheets in support of the current proposed increase on the above-referenced Long-Term Care Insurance products.

The base rate increase applies to the base policy and all applicable benefit riders for which a premium is paid. The rate increase will be effective on the first premium due date subsequent to state insurance department approval and in accordance with state policyholder notification requirements, with the additional condition that no policyholder will receive a rate increase sooner than one year after receiving a prior rate increase, if applicable.

This filing applies to inforce policies issued in this state. The above referenced policy forms are Group Long Term Care insurance products, which are no longer being sold.

Enclosed are any necessary certifications, transmittals, and/or filing fees as may be required by your state. I hope that with this information your approval of this filing will be forthcoming. If you have any questions or need additional information, please feel free to contact me.

Sincerely,



Deborah A. Keeler, ASA, MAAA
Senior Associate Actuary
Continental General Insurance Company
11001 Lakeline Blvd, Suite 120
Austin, Texas 78717